



City and County of Kingston upon Hull

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# ANNUAL REPORT

UPON THE

# HEALTH

*of* **KINGSTON UPON HULL**


FOR THE YEAR

# 1955

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ALEXANDER HUTCHISON

*Medical Officer of Health and Principal School Medical Officer*



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# Health Committee, 1955-56.

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23.10.1955

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COUNCILLOR J. W. SMITH, Deputy Chairman

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W. PASHBY, O.B.E.

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J. CAMPBELL

E. G. CARR

(Mrs.) C. E. ELLIS

COUNCILLORS—

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G. E. FOX

(Mrs.) M. HEATH, M.B.E.

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Mrs. M. E. PASHBY

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Alderman H. KNEESHAW, Deputy Chairman

Alderman A. K. JACOBS

Councillor J. J. NICHOLLS

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Alderman W. E. BODY

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„ J. DUNBAR

„ (Miss) A. MAJOR

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„ R. E. MIDDLETON

„ S. H. SMITH

„ J. W. SMITH

„ G. K. SPRUIT

„ J. S. WILSON, J.P.



# Staff of the Health Department

## Medical Officer of Health:

ALEXANDER HUTCHISON

## Deputy Medical Officer of Health:

ROWLAND GWYN DAVIES, M.D., D.P.H.

## Senior Medical Officers:

*School Health Service:* ALASTAIR M. R. CANN, M.D., M.R.C.S., L.R.C.P., D.C.H.

*Care and After-Care:* CECIL H. PHILLIPS, M.R.C.S., L.R.C.P., D.P.H.

*Maternity and Child Welfare:* MARGARET I. HENDRIE, M.D., D.P.H., D.C.H.,  
D. Obst. R.C.O.G.

## Assistant Medical Officers:

*(Combined duties in Maternity and Child Welfare, School Health and Port Health Services)*

GEOFFREY R. WALKER, M.B., Ch.B., D.P.H., D.T.M.

KATHLEEN A. WILSON, M.B., Ch.B., B.A.O., L.M., D.P.H.

CHRISTINE N. R. CAMPBELL, M.B., Ch.B.

ELIZA J. CARSON, M.B., Ch.B., B.A.O.

JEAN M. BARROWMAN, M.B., Ch.B.

MARY P. FLEMING, M.B., B.Ch., B.A.O., D.P.H., D.C.H., B.Sc.

JOSEPH TONG, L.M.S.S.A. (Lond.), C.P.H. (Leeds)

SAMUEL KLINGER, M.D. (Vienna)

ISABEL M. McCULLOUGH, L.R.C.P. and S. (Ireland)

MARGARET M. BELL, B.A., M.B., B.Ch., B.A.O., D.C.H.

FRANCES W. MOYES, M.B., Ch.B.

## Nursing Officers:

Superintendent: FLORENCE HOLDEN, S.R.N., S.C.M., H.V.CERT.

Deputy Superintendent: ANNIE E. BALSDON, S.R.N., S.C.M., S.R.C.N. H.V.CERT.

## Health Visitors:

Tutor: MIRIAM HUDSON, S.R.N., S.C.M., H.V.CERT.

29 Health Visitors

## Midwives:

Non-Medical Supervisors: MAUD B. GREENLEY, S.R.N., S.C.M.

EDITH R. WIRTH, S.R.N., S.C.M.

Superintendent (Part II Training School): GLADYS BOLTON, S.R.N., S.C.M.

50 Midwives

## District Nurses:

Acting Superintendent: ELSIE JONES, S.R.N., S.C.M.

37 Female Nurses, 6 Male Nurses

## Home Helps:

Organiser: MURIEL M. FIELD

1 Assistant Organiser and 196 Home Helps

## Tuberculosis:

Consultant Chest Physician: ROBERT HARDY, M.D., D.P.H. (Part-time)

5 Tuberculosis Visitors

								<i>Whole-time</i>	<i>Part-time</i>
Medical Staff	...	...	...	...	...	...	...	17	—
Clerical Staff	...	...	...	...	...	...	...	69	1
Inspectorial Staff	...	...	...	...	...	...	...	46	—
Nursing (including Students)	...	...	...	...	...	...	...	165	9
Mental Health	...	...	...	...	...	...	...	18	—
Disinfecting	...	...	...	...	...	...	...	6	—
Domestic Helps and "Sitters-up"	...	...	...	...	...	...	...	27	220
Domestic Workers	...	...	...	...	...	...	...	9	32
Ambulance (including Maintenance)	...	...	...	...	...	...	...	82	—
Medical Auxiliaries	...	...	...	...	...	...	...	2	1
Rodent Operatives, &c.	...	...	...	...	...	...	...	21	—
Others	...	...	...	...	...	...	...	4	13
								<hr/>	<hr/>
				Totals	...	...	...	466	276

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GUTHALL,

KINGSTON UPON HULL,

May, 1956.

*My Lord Mayor, Ladies and Gentlemen,*

I have pleasure in presenting to you my fourth Annual Report for the City of Hull for the year ended 31st December, 1955, and have included in the volume a report on the School Health Service for that year.

The health of the City remains good. The number of births and the number of deaths remain about the same as in the year 1954.

I am happy to report that the infantile mortality rate was further reduced to the very satisfactory figure of 26.4 per thousand. On closer examination of this figure it will be seen that the total number of infant deaths fell from 186 in 1954 to 143 in 1955. The neo-natal deaths fell from 106 in 1954 to 85 in 1955. The deaths in the neo-natal period constitute the hard core of infantile mortality and the fact that this figure has been reduced by 21 in one year, representing a reduction of the neo-natal mortality by 3.6 per thousand, is most satisfactory and encouraging. The number of deaths from injury at birth remains as before, but the deaths from atelectasis and congenital malformations show definite decreases. Unfortunately the deaths from prematurity showed an increase. In the period 1-12 months, the number of deaths from pneumonia fell considerably and this, too, helped to reduce the over-all infant mortality figure. There is no doubt that the reduction in the infantile mortality rate is due to better ante-natal care of the pregnant woman, better care during labour, and better maternal and child welfare services after the birth of the child. Great credit for this reduction must go to the medical and nursing staffs of the Health Department, together with their colleagues in the hospitals and to the general practitioners in the City.

During the year screening tests to ascertain haemoglobin levels were introduced at the ante-natal clinics. These revealed that a fairly high proportion of women attending these clinics suffered from anaemia and steps were taken to remedy this defect.

In order to tackle the problem of prematurity, lectures have been given to all Health Visitors and to Midwives on this complicated subject, and arrangements have also been made with the Hull (A) Group Hospital Management Committee to give a 3-weeks training course at the premature baby unit at Hedon Road Maternity Hospital to any Health Visitor or Midwife in the Department who wishes to avail herself of this opportunity.



Arrangements have been made by the Health Department to organise refresher courses for Midwives during 1956, in accordance with Rule G.1 of the Central Midwives Board. Hull will be the first local authority in the country to arrange such courses.

The work at the Birth Control Clinic has been increased three-fold since 1953, and continues to perform an excellent service.

The Home Help and Sitters-Up Services continue to expand and to do invaluable work. Both of these Services do a tremendous amount of quiet and efficient work, often under very difficult conditions. In my opinion no Health Department could function without them.

The Care and After Care Services made excellent progress during the year. The number of nursing requisites loaned out and the number of recuperative holidays increased, and so also did the amount of milk and clothing provided for the tuberculous patient. In January domiciliary occupational therapy commenced for home bound patients and met with a ready response. In December an Adult Male Occupation Centre was opened at George Yard and was an immediate success. The Ministry of Health approved in principle the building of a new Occupation Centre, to accommodate 135 children, at the junction of Leads Road and Tween-dykes Road. The administration of the mental health section was reorganised. A Senior Mental Health Worker was appointed, and the other officers re-designated Mental Health Workers. Officers are now authorised under both the Lunacy and Mental Deficiency Acts, and a more efficient service has resulted.

A great deal of work, mostly outside office hours, was undertaken in an effort to expand Health Education activities. New techniques such as the use of flannel-graphs were introduced, and the cinema projector was in constant use at lectures and group discussions.

The work done by the Ambulance Service went on increasing throughout the year. The staff worked from extremely poor premises but were never downhearted and gave excellent service. The Ministry of Health have given approval in principle for the erection of a new Ambulance Station at Osbourne Street, which will accommodate 50 vehicles and incorporate modern and up-to-date facilities for the staff.

The District Nursing Service has also expanded during the year. More mechanical transport was made available to help to cope with the increased demands on the Service, especially in the outlying suburbs.

The problem of providing Health Centres on the new Estates and also in the redevelopment areas was under discussion during the year. Meetings have taken



place between the Local Health Authority and the general practitioners to discuss Health Centre provision for the Bilton Grange Estate, the Longhill Estate and the Greatfield Estate. It has been decided not to proceed with a Health Centre at Longhill Estate and Corporation houses have been made available to practitioners in that area. The Greatfield Estate Health Centre is still under discussion, but agreement has been reached with the Executive Council to build a Health Centre at Bilton Grange and the Ministry of Health has given approval in principle for this project.

I regret to have to record an outbreak of diphtheria during the year, in which 17 cases occurred, 15 of which were under the age of 15 years. Full details of this outbreak are described in the body of the report. Dysentery was fairly widespread throughout the City and two large outbreaks occurred at the children's Occupation Centre and at the Buckingham Street School.

There was a substantial fall in the number of deaths from tuberculosis—60 as against 81 in 1954. Four years ago it was 100, ten years ago it was 228. This is a vast improvement and is due to the concerted effort made by all workers in the field of tuberculosis to eliminate this disease. The number of new cases discovered also fell during the year. This figure has remained fairly constant, between 300 and 400, for the past few years. The Chart facing page 20 makes an interesting comparison between the death rates from cancer and tuberculosis, over the past 70 years. From this Chart it will be seen that cancer is killing more people per year than did tuberculosis 70 years ago.

In the field of environmental hygiene and sanitation, the year has been notable in several respects. A programme of slum clearance, involving the demolition of 14,768 unfit houses over a period of 15 years, was drawn up and submitted to the Ministry of Housing and Local Government in accordance with the requirements of the Housing Repairs and Rents Act, 1954. Other provisions of the same Act, namely, those relating to Certificates of Disrepair, had their first full year in operation and appear to be working satisfactorily. Atmospheric pollution and food hygiene also received special attention in view of the new legislation on both these subjects which was about to come into operation. At the beginning of December the City became a 'specified area', so that all milk sold by retail within the City must be either tuberculin tested, pasteurised or sterilized, thereby greatly reducing the risk of milk-borne infection.

The work of meat inspection continues to be done under difficult conditions in slaughterhouses which are far from ideal, and the public abattoir, which the Corporation is doing its utmost to obtain, is both desirable and necessary. Great credit is due to the Inspectorial staff and the trade for the maintenance of such a high standard of inspection in the City.

It is pleasing to note that the trades and the public are becoming more conscious of the vital part of our work concerned with food hygiene, and much co-operation has been received by the inspectorial staff when visiting the various premises in the City.

I regret to have to report the death of Councillor George E. Brint, who was appointed Chairman of the Health Committee on 28th May, 1953, in succession to the late Alderman R. E. Smith. Councillor Brint was a quiet, unassuming man whose only aim was to improve the health services of the City. In this he did excellent work and he will be sadly missed. Councillor William Hobden, who had been Deputy Chairman of the Health Committee, was appointed Chairman in December, and Councillor J. W. Smith was appointed Deputy Chairman.

Two new appointments were made during the year, Dr. R. G. Davies being appointed Deputy Medical Officer of Health and Deputy Principal School Medical Officer, and Dr. M. I. Hendrie being appointed Senior Medical Officer for Maternity and Child Welfare. Both commenced duty in April.

I regret to report that there are still many vacancies for both the Health Visiting and Inspectorial staffs. This deficiency has hindered the efficiency of the Department and although strenuous efforts have been made to increase recruitment these have met with little response. This, however, is not peculiar to Hull as many other authorities throughout the country are experiencing the same difficulties.

Hull is an officially approved training centre for Sanitary Inspectors, and the University of Hull run a course of training for Health Visitors in conjunction with the Health Department.

The staff have worked exceedingly well throughout the whole year, as is reflected by the results shown in the main body of the Report. Their zeal knows no limits, their co-operation is wholehearted, and their loyalty to the Department and to myself is something I cherish most dearly. I would also like to pay tribute to the Chairman and Members of the various Committees and Sub-Committees of the Corporation dealing with health, who have on all occasions supported and encouraged me.

I have the honour to be,

Your obedient servant,

ALEXANDER HUTCHISON,

*Medical Officer of Health and  
Principal School Medical Officer.*

PART I  
STATISTICS  
SOCIAL CONDITIONS  
GENERAL HEALTH SERVICES

# VITAL STATISTICS

Area of City in Acres .....	14,493	
Census Population at 8th April 1951 .....	299,105	
	<b>1955</b>	<b>1954</b>
Estimated Mid-year Home Population .....	299,600	300,000
Marriages .....	2,735	2,584
Marriage-rate per 1,000 population .....	18.2	17.2
Live Births .....	5,413	5,490
1955— <i>Legitimate</i> : Male 2,656 ; Female 2,451 ; <i>Illegitimate</i> : Male 156 ; Female 150.		
Crude birth rate per 1,000 population .....	18.07	18.3
Adjusted birth rate per 1,000 population .....	17.3	17.6
Stillbirths .....	139	156
1955— <i>Legitimate</i> : Male 77 ; Female 52 ; <i>Illegitimate</i> : Male 6 ; Female 4.		
Rate per 1,000 total (live and still) births .....	25.04	27.6
Deaths (all causes) .....	3,240	3,205
Crude death rate per 1,000 population .....	10.8	10.7
Adjusted death rate per 1,000 population .....	12.4	12.3
<i>Maternal Mortality</i> —		
Deaths from all causes .....	6	4
Death rate per 1,000 live births .....	1.1	0.73
Death rate per 1,000 live and still births .....	1.08	0.71
<i>Infant Mortality</i> —		
Deaths of infants under 1 year of age .....	143	186
1955— <i>Legitimate</i> : Male 82 ; Female 52 ; <i>Illegitimate</i> : Male 4 ; Female 5.		
Death rate of infants under 1 year of age		
All infants per 1,000 live births .....	26.4	33.9
Legitimate infants per 1,000 legitimate live births .....	26.2	33.6
Illegitimate infants per 1,000 illegitimate live births .....	29.4	37.6
<i>Neo-Natal Mortality</i> —		
Deaths of infants under 1 month of age .....	85	106
Rate per 1,000 live births .....	15.7	19.3
Deaths from Gastritis, Enteritis and Diarrhoea (under 2 years) .....	3	7
Rate per 1,000 live births .....	0.55	1.28

	1955	1951
<i>Death rates per 1,000 population —</i>		
Measles	0.003	—
Whooping Cough	—	0.00
Diphtheria	0.003	0.00
Cancer (inc. Leukæmia and Aleukæmia)	2.04	1.98
Tuberculosis—all forms	0.2	0.27
Respiratory ..	0.19	0.25
Non-Respiratory .....	0.01	0.02
Number of inhabited houses (excluding houses and shops) according to Rate Books	88,780	88,010

	Year ended 31st March	
	1956	1955
The rateable value of the City	£2,061,902	£1,990,824
Rate in the £ (excluding Water Charges)	26s. 10d.	26s. 10d.
Gross Product of a 1d. General Rate	£8,591	£8,295

*Births and Deaths.* The following table shows the crude birth-rates and death-rates for each of the last 5 years and at 10 yearly intervals from 1900.

TABLE I

<i>Year</i>	<i>No. of births</i>	<i>Birth rate per 1,000 population</i>	<i>No. of deaths</i>	<i>Death rate per 1,000 population</i>
1955	5,413	18.07	3,240	10.8
1954	5,490	18.3	3,205	10.7
1953	5,704	19.1	3,265	10.9
1952	5,560	18.6	3,321	11.1
1951	5,658	19.0	3,585	12.0
1950	5,825	19.3	3,476	11.5
1940	4,984	18.6	4,089	15.3
1930	6,288	20.6	3,833	12.5
1920	8,469	29.1	3,834	13.2
1910	8,014	29.1	4,253	15.2
1900	7,820	32.7	4,610	19.2

The births and deaths in Hull were spread over the year as follows :

	<i>1st Quarter</i>	<i>2nd Quarter</i>	<i>3rd Quarter</i>	<i>4th Quarter</i>
Deaths ..	1,041	753	587	859
Births ..	1,318	1,383	1,397	1,315

Full particulars of infant and maternal mortality, prematurity, etc. appear in the section of this report which deals with the Care of Mothers and Young Children (see pages 101 and 102).

*Causes of Death.* Table IV (page 22) gives details of the principal causes of death.

A comparison of the death-rates from diseases with the heavier incidence in 1955, with those in 1954, is given below.

		<i>Rates per 1,000 population</i>	
		1954	1955
Coronary disease angina ....	....	1.09	1.27
Hypertension with heart disease ....	....	0.22	0.28
Other heart diseases ....	....	1.79	1.75
Other circulatory diseases ....	....	0.34	0.36
Cancer (inc. Leukæmia and Aleukæmia) ....	....	1.98	2.04
Vascular lesions affecting central nervous system ..	..	1.33	1.45
Pneumonia ....	....	0.71	0.52
Bronchitis ....	....	0.71	0.73
Respiratory Tuberculosis ....	....	0.25	0.19

*Area Comparability Factors.* The area comparability factors for this City as notified by the Registrar General are 0.96 for births and 1.15 for deaths. The adjusted birth-rate is therefore 17.3 per 1,000 population and the adjusted death-rate 12.4.

*Male and Female Deaths.* There were 1,721 deaths of males and 1,519 of females. Assuming a similar proportion of males to females in the population as at the 1951 Census (143,117 males; 155,988 females) the death-rates were 12.02 per 1,000 males and 9.74 per 1,000 females.

The main diseases with heavier fatality in males were:—

	<i>Male</i>	<i>Female</i>
Respiratory Tuberculosis ....	38	18
Non-respiratory Tuberculosis ..	4	—
Malignant neoplasm, lung and bronchus ..	115	19
Coronary disease, angina ..	215	164
Bronchitis ..	152	68
Ulcer of stomach and duodenum ...	32	18



In contrast the main diseases with heavier mortality in females were: —

	<i>Male</i>	<i>Female</i>
Vascular lesions affecting central nervous system	193	242
Heart diseases (excluding coronary disease, angina, and hypertension with heart disease)	225	298

#### DISEASES WITH A HIGH FATALITY RATE

The diseases mentioned below accounted for 2,424 of the 3,240 deaths in 1955, which is almost 75 per cent.

*Cancer.* The number of deaths from cancer (including leukæmia and aleukæmia) rose again during 1955 to a total of 610. 105 of these deaths were attributable to cancer of the stomach and 134 to cancer of the lung and bronchus. Of the latter 115 were males and only 19 females.

Cancer accounted for 18·8 per cent of the deaths in Hull during 1955, compared with 18·5 per cent in 1954. The death-rates were 2·04 in 1955 and 1·98 in 1954.

It is interesting to note that the cancer death rate is now higher than the death rate from tuberculosis 70 years ago.

*Heart Diseases.* 987 deaths were classified as being due to coronary disease, angina, hypertensive heart disease and other heart diseases; this was 30·5 per cent of the total deaths. The comparable figures for 1954 were 931 deaths and 29·05 per cent. 721 of the deaths were of people over 65 years of age (including 491 over 75 years of age) and only 26 were under the age of 45 years. The combined death-rates from all heart diseases were 3·2 per 1,000 population in 1955 and 3·1 in 1954.

*Vascular Lesions of Nervous System.* There were 435 deaths in this classification (chiefly cerebral thrombosis or cerebral hæmorrhage). This was 1·45 per cent of the total deaths. 143 of the deaths were of people aged 65 to 74 years and 216 of people over the age of 75 years. The comparable figures for 1954 were 399 deaths and 1·3 per cent.

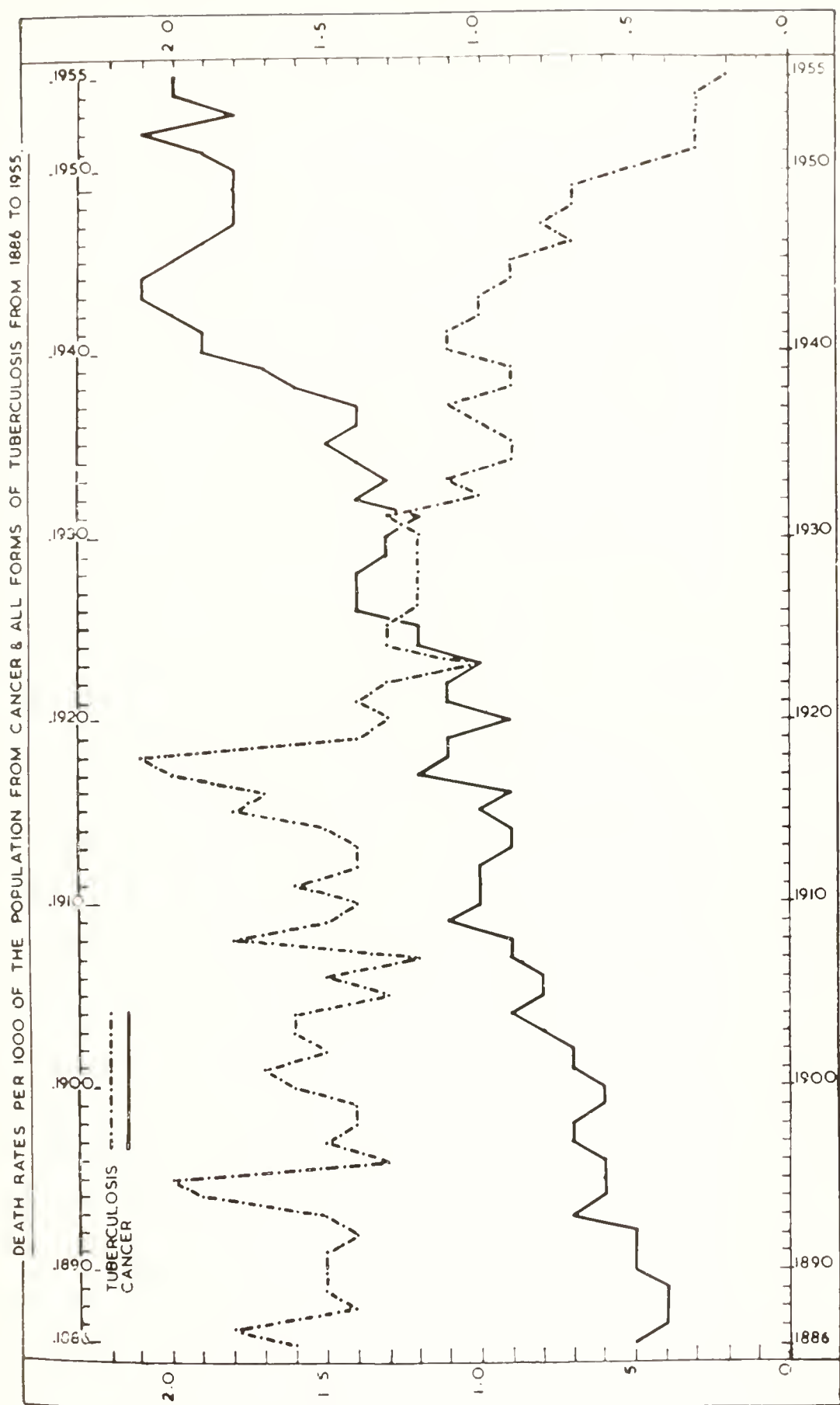
*Pneumonia, Bronchitis and other non-Tuberculous Respiratory Diseases.* There were 392 deaths from these diseases, mainly pneumonia or bronchitis, the combined death-rate being 1·3.

TABLE II—PRINCIPAL SITES OF FATAL CANCER, 1955.

SITE OF DISEASE		AGE GROUP					Totals	Grand Totals
		0-20	20-40	40-60	60-80	Over 80		
Buccal Cavity and Pharynx	M.	—	—	2	12	1	15	18
	F.	—	—	—	1	2	3	
Digestive System and Peritoneum	M.	—	2	34	85	15	136	242
	F.	—	1	26	66	13	106	
Respiratory System	M.	—	1	60	60	1	122	140
	F.	—	1	6	10	1	18	
Uterus	F.	—	3	7	14	3	27	27
Other Female Genital Organs	F.	—	—	4	11	2	17	17
Breast	M.	—	—	1	—	—	1	48
	F.	—	1	17	25	4	47	
Male Genital Organs	M.	—	2	2	6	—	10	10
Urinery Organs	M.	—	—	1	13	—	14	21
	F.	—	1	2	3	1	7	
Skin (scrotum excepted)	M.	—	—	—	2	1	3	11
	F.	—	—	3	3	2	8	
Brain and other parts of the nervous system	M.	—	—	3	—	3	6	8
	F.	—	—	—	2	—	2	
Other or Unspecified Organs	M.	1	4	7	16	2	30	57
	F.	2	5	9	9	2	27	
Total	M.	1	9	110	194	23	337	599
	F.	2	12	74	144	30	262	

N.B.—These figures have been compiled locally and may not agree with those of the Registrar-General which have been used elsewhere in this Report.





Comparison of the City's death rates from Cancer and all forms of Tuberculosis from 1886-1955



## DEATHS FROM ROAD VEHICULAR ACCIDENTS

The Coroner has been good enough to supply the following information on the fatal road accidents which occurred in his area during 1955.

19 inquests were held in connection with fatal accidents due to the use of a vehicle in a street or "public highway". Of this number 15 were in respect of accidents which occurred in Hull and 4 in regard to accidents outside the city boundary.

A summary of the facts established in the 15 local cases is as follows:

Pedestrians (8) 4 knocked down when crossing the road (3 by motor cars, 1 by a motor lorry), 2 children knocked down whilst running across the road, (1 by an electric van and 1 by a motor lorry), 1 child was knocked off her tricycle by a motor lorry and 1 child was run over by a reversing motor van whilst playing on the road.

1 man fell from a stationary motor lorry whilst securing his load.

Motor Cyclist (1) fell from motor cycle after skidding.

Pedal Cyclists (5) 2 knocked off cycles by motor-cars (including 1 child), 1 collided with passing motor lorry, 1 knocked from his cycle and run over by a motor lorry, 1 collided with omnibus whilst riding his pedal cycle.

TABLE III

AGE PERIODS OF PERSONS KILLED

Age Period	Under 5 years	5-14 years	15-24 years	25-44 years	45-64 years	65 years and over	Total
Males	—	3	1	3	1	4	12
Females	—	3	—	—	1	3	7
Total	—	6	1	3	2	7	19

TABLE IV—PRINCIPAL CAUSES OF DEATH, 1955

DEATHS IN AGE GROUPS OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT

CAUSE OF DEATH	Under 1 year	1 to 4	5 to 14	15 to 24	25 to 44	45 to 64	65 to 74	75 years and over	All Ages		Total Deaths in 1954
									Male	Female	
Tuberculosis of Respiratory System	—	1	—	1	24	17	11	2	38	18	56
Tuberculosis, other forms	1	—	—	1	—	1	1	—	4	4	8
Syphilitic Disease	—	—	—	—	—	2	6	1	5	1	6
Diphtheria	—	1	—	—	—	—	—	—	—	1	1
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections	2	—	—	—	—	—	—	—	1	1	2
Acute Poliomyelitis	1	1	—	—	—	—	—	—	1	1	2
Measles	—	—	—	—	—	—	—	—	—	—	—
All other diseases classified as Infective and Parasitic	—	2	2	—	1	3	1	—	2	7	9
Malignant Neoplasm, stomach	—	—	—	—	2	33	44	26	71	34	105
Malignant Neoplasm, lung, bronchus	—	—	—	—	9	82	35	8	115	19	134
Malignant Neoplasm, breast	—	—	—	—	6	23	11	10	—	49	59
Malignant Neoplasm, uterus	—	—	—	—	3	15	6	5	—	29	24
Malignant Neoplasm, lymphatic neoplasms	—	—	—	—	21	98	85	72	150	131	281
Leukemia and Aleukemia	—	1	2	2	4	2	3	—	5	6	11
Diabetes Mellitus	—	—	—	—	—	4	—	7	3	10	13
Vascular lesions affecting central nervous system	—	—	—	—	5	71	143	216	193	242	435
Coronary disease, angina	—	—	—	—	10	111	142	116	215	164	379
Hypertension with heart disease	—	—	—	—	16	8	36	41	32	53	85
Other heart diseases	—	—	—	2	1	63	108	334	225	298	523
Other circulatory diseases	—	—	—	—	1	9	31	67	51	57	108
Influenza	—	—	—	—	3	6	1	1	10	1	20
Pneumonia	48	2	1	1	3	23	36	41	86	69	155
Bronchitis	2	—	—	—	5	68	69	76	152	68	220
Other diseases of Respiratory System	—	—	—	—	2	8	2	5	12	5	17
Ulcer of Stomach and Duodenum	—	—	—	—	4	20	14	12	32	18	50
Gastritis, Enteritis and Diarrhoea	2	1	—	1	4	23	16	13	34	24	58
Nephritis and Nephrosis	—	—	—	2	—	1	13	26	—	—	40
Hyperplasia of prostate	—	—	—	—	5	—	—	—	—	6	6
Pregnancy, childbirth and abortion	19	1	1	1	2	3	—	1	18	11	29
Congenital malformations	65	2	3	3	12	45	49	64	121	122	243
Other defined and ill-defined diseases	—	—	6	2	3	4	3	2	14	6	20
Motor vehicle accidents	—	—	5	5	5	18	11	35	50	40	90
All other accidents	2	9	5	—	9	23	10	5	29	18	47
Suicide	1	—	—	—	2	1	—	—	3	1	4
Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—
TOTAL	143	21	22	23	161	789	894	1187	1721	1519	3240
											3205

Figures supplied by the Registrar General.

TABLE V

INFANT MORTALITY (NET DEATHS FROM STATED CAUSES UNDER ONE YEAR OF AGE)—1955

CAUSES OF DEATH	1st Day	2nd Day	3rd Day	4th Day	5th Day	6th Day	7th Day	1st Week			Under 1 Mth.	1/2 Mths.	2/3 Mths.	3/4 Mths.	4/5 Mths.	5/6 Mths.	6/7 Mths.	7/8 Mths.	8/9 Mths.	9/10 Mths.	10/11 Mths.	11/12 Mths.	Total		
								1st Week	2nd Week	3rd Week													4th Week	1955	1954
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Chicken-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Tuberculous Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other Tuber. Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Meningitis (not T.B.)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Convulsions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Laryngitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Bronchitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pneumonia (all forms)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diarrhoea and Enteritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Gastritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Syphilis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Rickets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Suffocation (Overlaying)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Injury at Birth	3	4	3	1	—	—	—	11	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Atelctasis	7	2	2	—	—	—	—	11	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Congenital Malformations	6	1	1	1	1	1	—	11	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Premature Birth	20	—	—	—	—	—	—	22	3	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Atrophy, Debility and Marasmus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other Causes	6	2	2	—	—	2	—	12	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	42	9	8	2	2	4	—	67	10	6	2	—	85	17	16	8	4	6	1	1	2	—	2	—	
1954	48	14	12	5	6	1	2	88	13	4	1	—	106	18	24	10	2	8	7	4	3	3	—	—	

These figures have been compiled locally and may not agree with those in Table IV

TABLE VI.

VITAL STATISTICS FOR THE YEAR 1955 IN RESPECT OF THE 21 WARDS IN THE CITY

District	Estimated Popula- tion	Area in acres, Land and Inland Water- ways	Persons to an acre	No. of Births	Birth Rate per 1,000 of Popula- tion	No. of Deaths	Death Rate from all causes per 1,000 Popula- tion	No. of Deaths under 1 year	* Deaths under 1 year per 1,000 Live Births
Albert	8,757	285	30.7	274	31.8	154	17.6	11	40.5
Alexandra	15,072	598	25.2	312	20.7	139	9.2	5	16.0
Beverley	13,360	993	13.5	175	13.1	162	12.0	5	28.6
Botanic	12,907	248	52.05	215	16.6	163	12.5	18	83.7
East Central	6,718	170	39.5	197	29.3	67	9.9	9	45.7
West Central	10,290	120	85.75	276	26.8	134	13.0	5	18.1
Coltman	14,900	220	67.7	462	31.0	185	12.4	15	32.5
Drypool	6,916	381	18.1	199	28.8	86	12.4	5	25.1
Marfleet	11,986	1,401	8.5	176	14.7	109	9.1	3	17.0
Myton	3,962	263	15.1	118	29.8	59	14.9	6	50.8
Newland	16,670	705	23.6	171	10.1	192	11.5	1	5.9
North Newington	15,476	278	55.65	230	14.8	182	11.7	10	43.5
South Newington	12,630	332	38.05	237	18.8	140	11.08	8	33.8
Paragon	2,946	220	13.4	51	17.3	52	17.3	1	19.6
Park	9,158	214	42.2	209	22.8	118	12.8	4	19.1
Pickering	33,744	1,472	22.9	285	8.4	312	9.2	4	14.0
St. Andrew's	11,970	1,075	11.13	234	19.5	129	10.8	4	17.1
Southcoates	11,084	202	54.9	254	22.9	108	9.7	2	7.9
Stoneferry	18,193	1,610	11.3	243	13.3	194	10.7	5	20.6
Sutton	30,881	2,130	14.5	701	22.7	256	8.3	9	12.8
University	32,000	1,576	20.3	394	12.3	299	9.3	13	33.0
TOTAL	299,600	14,493	20.7	5,413	18.07	3,240	10.8	143	26.4

NOTES.—Ward populations have been estimated on the basis of the 1951 census figures

\*Most of the infantile mortality rates of wards are based on very small numbers and comparisons with other areas or earlier years may have little statistical significance; it is preferable to refer to the absolute numbers involved.

# NATURAL AND SOCIAL CONDITIONS OF THE AREA

## METEOROLOGY

Meteorological records are kept by the General Superintendent of Parks at a Climatological Station in Pearson Park. Readings are taken daily at 9 a.m. and 9 p.m.

Particulars of the meteorological readings will be found in Table VIII.

Eight feet above sea level

	1955	1954
Highest Mean Temperature ....	70·3 deg. 19th August	68·0 deg. 31st August
Lowest Mean Temperature ....	27·5 deg. 18th Feb.	27·0 deg. 1st Feb.
Total Rainfall ....	19·68 ins.	31·29 ins.
No. of days on which rain fell ....	179	217
No. of sunless days ....	68	74
No. of hours of bright sunshine ....	1494·3	1168·6

Direction of prevailing wind :—

	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calm
1955 ....	18	63	11	44	19	86	13	73	38
1954 ....	15	36	10	33	19	120	31	65	36

TABLE VII

SUNSHINE AND RAINFALL FOR 19 5 AND PREVIOUS 5 YEARS

	ANNUALLY		THIRD QUARTERS					
	Hours of Bright Sunshine	Inches of Rain	Hours of Bright Sunshine			Inches of Rain		
			July.	Aug.	Sept.	July	Aug.	Sept.
1950	1,337	30·81	208·3	180·4	99·3	2·99	4·48	2·69
1951	1,314	27·74	180·2	152·1	125·8	1·54	5·31	1·07
1952	1,270	23·84	150·6	157·2	113·8	2·53	1·23	3·63
1953	1,279	21·40	185·7	201·6	156·2	2·20	2·52	0·68
1954	1,169	31·29	126·3	111·5	157·5	1·94	6·19	2·30
1955	1,494	19·68	241·3	160·2	153·3	·77	·77	5·3



**TABLE VIII**  
METEOROLOGICAL REPORT FOR THE YEAR 1955

	At Nine a.m. Local Time				Mean Relative Humidity.	At Nine p.m. Local Time				Mean Temperature at 9 p.m. Readings.	Under-ground Temperature		Total Hours of Bright Sunshine.	Directions of the Wind								Total Rainfall.
	Mean Reading of					Reading of Self-registering Thermometers					At 1 ft.	At 4 ft.		N.	N.E.	E.	S.E.	S.	S.W.	N.W.	Calm	
	Baro-meter	Attach-ed Therm.	Dry Bulb Therm.	Wet Bulb Therm.		Max. in Air	Min. in Air	Max.in Rays of Sun	Min. On Grass													
January	ins. 29.8	deg. 42	deg. 36.6	deg. 35.7	deg. 41	deg. 34	deg. 47	deg. 31	deg. 38	deg. 38.2	deg. 43.8	hours 30.0	1	4	—	4	5	8	1	3	5	ins. 1.50
February	29.7	41	34.5	33.7	40	30	63	29	35	37.4	42.2	84.0	3	5	4	1	2	2	—	5	6	2.07
March	30.1	41	38.8	36.7	45	32	74	29	39	37.4	40.7	125.3	3	9	1	2	3	3	—	8	2	2.37
April	30.2	51	49.6	46.7	57	42	90	38	50	46.5	43.4	148.5	1	8	—	2	1	11	2	5	—	0.61
May	29.9	52	49.9	46.4	56	43	90	38	50	49.8	46.9	174.7	1	4	1	5	—	9	3	7	1	3.33
June	30.0	53	56.8	52.7	62	49	91	46	56	56.4	50.3	171.5	1	5	—	8	—	7	—	6	3	2.09
July	30.2	67	63.8	59.9	71	55	106	51	63	71.7	54.3	241.3	2	14	—	2	2	—	1	2	8	0.77
August	29.8	66	63.7	59.4	71	57	105	53	64	63.1	57.3	160.2	4	7	3	1	1	3	—	5	7	0.77
September	30.0	60	59.9	55.4	66	51	97	46	59	58.3	57.2	153.3	—	—	—	3	2	11	2	11	1	0.35
October	30.0	51	48.6	45.9	57	42	82	37	50	51.2	54.1	128.1	—	1	1	6	—	12	2	8	1	2.07
November	30.1	48	46.1	44.3	49	42	60	37	46	46.0	49.9	32.8	2	5	—	4	3	8	—	5	3	0.85
December	29.7	45	41.8	39.8	46	37	52	32	41	41.7	46.7	44.6	—	1	1	6	—	12	2	8	1	2.90
Total or Average	29.9	52	49.2	46.4	55	43	80	39	49	49.8	48.9	1494.3	18	63	11	44	19	86	13	73	38	19.68





# GENERAL PROVISION OF HEALTH SERVICES

## CLINICS, TREATMENT CENTRES, ETC.

The Maternity and Child Welfare and School Clinics, provided by the Corporation, are interavailable to patients as required

### (a) Maternity and Child Welfare.

#### Infant Welfare Sessions—

West Hull Clinic, Coltman Street	Monday	}	2 p.m.
	Thursday		
King's Hall, Fountain Road	Tuesday	}	2 p.m.
	Thursday		
East Hull Clinic, Morrill Street	Wednesday	}	2 p.m.
	Thursday		
Methodist Mission Rooms, Carlton Street	Tuesday		2 p.m.
Parish Hall, Church of Transfiguration, Albert Ave.	Wednesday	}	2 p.m.
	Friday		
Methodist Church Rooms, Cottingham Road	Wednesday	}	2 p.m.
	Friday		
Methodist Rooms, Sutton	Tuesday		2 p.m.
North Hull Clinic, Ellerburn Avenue	Tuesday	}	2 p.m.
	Thursday		
Methodist Mission Hall, Preston Road	Tuesday	}	2 p.m.
	Friday		
Church of the Ascension, Priory Road	Monday	}	2 p.m.
	Friday		
St. Nicholas Church Hall, Pickering Road	Wednesday		2 p.m.
St. Martin's Church Hall, North Road	Monday		2 p.m.
Froghall Lane Clinic, Sutton Road	Tuesday		2 p.m.
Sykes Street Clinic	Friday		2 p.m.
St. Ninian's Church Hall, Chanterlands Avenue	Friday		2 p.m.
St. Michael's Church Hall, Holderness Road	Thursday		2 p.m.
St. Philip's Church, Amethyst Road	Monday	}	2 p.m.
	Wednesday		
Longhill Infants' School	Saturday		9-30 a.m.

#### Ante-Natal Sessions—

Sykes Street Clinic	Wednesday		9-30 a.m.
For Midwifery Centre cases	Monday	}	2 p.m.
	Thursday		
East Hull Clinic, Morrill Street	Monday	}	9-30 a.m.
	Wednesday		
	Friday		
North Hull Clinic, Ellerburn Avenue	Tuesday		9-30 a.m.
West Hull Clinic, 69 Coltman Street	Monday		9-30 a.m.
	Tuesday	}	2 p.m.
	Wednesday		
Church of the Ascension, Priory Road	Tuesday		9-30 a.m.
St. George's Church, Martfleet Lane	Thursday		9-30 a.m.

Birth Control Sessions—			
Sykes Street Clinic	Tuesday		9 a.m.
Artificial Sunlight Sessions—			
West Hull Clinic, 69 Coltman Street	Tuesday	}	9.30 a.m.
	Friday		
East Hull Clinic, Morrill Street	Tuesday	}	9.30 a.m.
	Friday		
North Hull Clinic, Ellerburn Avenue	Monday		9.30 a.m.
	Thursday		2 p.m.
Sykes Street Clinic	Tuesday	}	9.30 a.m.
	Friday		
Post-Natal Session—			
Sykes Street Clinic	Thursday		9.30 a.m.
X-Ray Sessions—			
East Hull Clinic, Morrill Street	Monday to Friday, 9 a.m. to 12 noon 2 p.m. to 5 p.m.		
Physiotherapy Sessions—			
East Hull Clinic, Morrill Street	Monday	}	9 a.m. to 12 noon
	Wednesday		
	Thursday		
(b) Day Nursery	Monday to Friday, 7 a.m. to 6 p.m.		
50 Pearson Park	Saturday, 7 a.m. to 2 p.m.		
The Day Nursery at 449 Holderness Road has remained closed.			

(c) School Clinics (see page 185).

*Registration of Nursing Homes.* Supervision of registered nursing homes was carried out in pursuance of the Public Health Act, 1936, and the model bye-laws issued by the Ministry of Health.

No new homes were registered during the year, but one was re-registered owing to change of ownership. The registration of one home was cancelled on the grounds of insufficient staffing, but this had not taken effect by the end of the year pending the hearing of an appeal against the cancellation.

There are 6 homes on the register; one provides accommodation for maternity and chronic medical cases, two take mainly surgical cases, and three take chronic medical cases.

Every Nursing Home was inspected by the Senior Medical Officer (Maternity and Child Welfare) during the year.

There were 111 live births, 1 still-birth, and no maternal deaths in registered private Nursing Homes.

*X-Ray Facilities.* Facilities for X-ray are available at East Hull Clinic for expectant mothers referred from the Ante-Natal Clinics, children from the Infant Welfare and School Clinics and patients from the Chest Clinics and the Health Department. During the year 218 cases were referred by the Maternity and Child Welfare Section; 192 by the School Health Service; 4104 by the Chest Clinics, and 1010 by the Health Department.

## CHEMICAL AND BACTERIOLOGICAL LABORATORIES

The chemical and bacteriological work undertaken in the City Laboratories in 1955 is the subject of a separate report by the City Analyst and Corporation Bacteriologist, D. J. T. Bagnall, Esq., A.C.G.F.C., F.R.I.C.

The number of samples examined chemically, excluding those submitted by the East Riding County Council and the Hull and Goole Port Health Authority, totalled 6,654, including 2,851 submitted under the Food and Drugs Act.

A total of 1,436 samples were examined bacteriologically and included the following:—

Milk	....	....	....	....	....	....	597
Ice Cream	....	....	....	....	....	....	46
Ice Lollies, etc.	....	....	....	....	....	....	43
Other Foods	....	....	....	....	....	....	10
Waters	....	....	....	....	....	....	490

Most of the bacteriological work for the city is performed in the Medical Research Council's Public Health Laboratory, which is accommodated in the same building as the City Laboratories. The Public Health Laboratory is under the direction of Dr. J. H. McCoy, and serves as the bacteriological centre for a wide area of Yorkshire.

## NATIONAL ASSISTANCE ACT 1948

Mr. G. H. Phillips Darley, Director of Welfare Services, has kindly supplied the following particulars about the working of the above-mentioned Act.

*Section 21.* Accommodation under the provisions of Section 21, National Assistance Act 1948, was provided during the year by the Welfare Services Department as follows:—

	<i>Residential</i>			<i>Temporary</i>		
	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>
Welfare Services Hostel— 160 Beverley Road	—	111*	—	—	62	76
Welfare Services Hostel— 188 Anlaby Road	126†	—	—	—	—	—
Bilton House— Wivern Road	23	31	—	—	—	—
Dunbar House, Sutton	37	—	—	—	—	—
Ferriby House, North Ferriby	10	32	—	—	—	—
Hugh Webster House, St. Luke's Street	16	19	—	—	—	—
Manor House, North Ferriby	16	23	—	—	—	—
Mentone House, Hessle	15	13	—	—	—	—
Rose Villa, Beverley Road	—	30	—	—	—	—
Westbourne House, Westbourne Avenue	—	33	—	—	—	—
Westgate House, Hornsea	10	22	—	—	—	—
Other Premises	—	—	—	10	18	89
<b>Total</b>	<b>253</b>	<b>314</b>	<b>—</b>	<b>10</b>	<b>80</b>	<b>165</b>

*Notes:*

\* 62 Resident females remaining at Welfare Services Hostel, 160 Beverley Road on 7th November, 1955 were transferred to Rose Villa and Westbourne House.

† This figure includes 1 Resident male accommodated under Section 21 (4) National Assistance Act, 1948, for whom this Authority is reimbursed by the East Riding County Council.

Included in the Grand Total above are 30 cases of evicted families, 12 of which remain, the balance of 18 being disposed of in the following manner:—

Found accommodation by own effort	13
Rehoused through Housing Department on approach by Welfare Services Department	5

Accommodation under the provisions of Section 21 (4), National Assistance Act, 1948, was provided during the year by other Authorities who were reimbursed by this Authority as follows:—

	<i>Residential</i>			<i>Temporary</i>		
	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>
East Riding County Council	1	3	—	—	—	—
West Riding County Council	—	5	—	—	1	7
County Borough of Oldham	1	—	—	—	—	—
<b>Total</b>	<b>2</b>	<b>8</b>	<b>—</b>	<b>—</b>	<b>1</b>	<b>7</b>

The need for accommodation was removed in a further 75 cases through disposal by the Welfare Services Department in the following manner :—

Rehoused through Housing Department	...	...	...	...	4
Rehoused through private landlords	.	...	...	...	11
Arrangement for accommodation at the Salvation Army Hostel and other Establishments (able-bodied men)	...	...	...	...	10
Returned to relatives following settlement of domestic upheaval through the medium of the Welfare Services Department intervention	...				9
Suspension of Eviction Notices or Orders to Quit following approach to agents or landlords by the Welfare Services Department	...	...			9
Fixed up with rooms	...	...	...	...	22
Travel arrangements made by N.A.B. to enable return to residence outside Kingston upon Hull	...	...	...	...	9
Service family rehoused under Army arrangements in Service Married Quarters	...	...	...	...	1

*Section 47.* In no case was action found to be necessary under the provision of Section 47, National Assistance Act, 1948.

*Section 26.* Under the provision of Section 26 the Welfare Services Committee made, during the year, financial contributions to 14 voluntary organisations in respect of residential accommodation provided by them, as follows:—

	<i>Men</i>	<i>Women</i>
Homes for the Aged	20	32
Homes for the Deaf and Dumb	6	5
Homes for the Blind	13	6
Homes for Epileptics	11	3
Homes for Cripples	2	2
	—	—
Total	52	48
	—	—

*Section 29.* In pursuance of the provisions of Section 29, the Welfare Services Committee, through the agency of the Hull and East Riding Institute for the Blind, arranged for the employment of 98 men and women at the Institute's workshop in the following trades :—

Cane furniture	Basket-making	Brush-making
Mat-making	Knitting	Chair re-seating

Arrangements were made for the general welfare of the Blind in the city, totalling 653 persons.

*Incidence of Blindness.* The following information has kindly been supplied through the Director of Welfare Services by Mr. A. Platt, Secretary and Manager of the Hull and East Riding Institute for the Blind.

During the year 92 Forms B.D.8 were received and the persons concerned were examined by the ophthalmic surgeons and dealt with as follows :—

Number certified as Blind	45
Number transferred from Partially Sighted to Blind Register	6
Number certified as Partially Sighted	22
Number Decertified from Blind Register	7
Number Decertified from Partially Sighted Register	1
Number examined and not considered to be either Blind or Partially Sighted	
Sighted	6
Number re-examined but no change in category	3
Number already on Blind Register but examined with a view to obtaining Bus and Bath Passes	2
	—
	92
	—

Details of follow-up action in cases certified as Blind, and recommended for treatment :—

1. *Surgical Cases*

(a) Operation performed but with little success	1
(b) No action through death of blind persons	2
(c) Awaiting operation if or when general condition permits	4
(d) Unfit for operation at present	4
(e) On observation list for future examination	3
	—
	14
	—

2. *Medical Cases*

(a) Receiving treatment	5
(b) On observation list for future examination	1
	—
	6
	—

3. *Cases for Hospital Supervision*

(a) Decertified following successful operation	1
(b) Receiving treatment	1
	—
	2
	—

Details of follow-up action in cases certified as Partially Sighted, and recommended for treatment :—

1. *Surgical Cases*

(a) On waiting list for operation	2
(b) On observation list for future examination	1
(c) Treatment recommended at a later date	2
	—
	5
	—

2. *Medical Cases*

(a) Receiving treatment	3
	—

3. *Hospital Supervision*

(a) Receiving treatment	3
	—



TABLE X.

ANALYSIS OF CASES CERTIFIED AS BLIND—1955

	Con- genital Defect	Myopic Error	Glaucoma	Cataract	Con- genital Syphilis	Vascular Diseases	Diabetic Retino- pathy	Menin- gitis	Tumour Adnexa	Local Infection of Coats of the Eye	Eczematous Kerato- conjunctiv- itis	Other Primary Ocular Defects	TOTAL
Number of Cases	2	6	9	17	2	3	2	1	1	3	2	3	51
History of Treatment:													
Not known	—	—	—	—	—	—	—	1	—	—	—	—	1
Incomplete	—	—	—	2	—	—	—	—	—	—	—	—	2
Treatment Refused	—	—	—	1	—	—	—	—	—	—	—	—	1
Condition not amenable to treatment	—	4	2	—	—	2	2	—	—	1	—	—	11
Successful	2	—	—	1	—	—	—	—	—	—	—	—	1
None	—	1	4	9	1	1	—	—	1	1	1	2	23
Failed	—	1	3	4	1	—	—	—	—	1	1	1	12
	2	6	9	17	2	3	2	1	1	3	2	3	51
Prognosis:													
Irremediable	1	2	7	2	2	2	1	1	1	2	2	3	26
Likely to Deteriorate	—	4	—	—	—	1	1	—	—	1	—	—	7
Stationary	—	—	1	1	—	—	—	—	—	—	—	—	2
Potentially Remediable	—	—	1	7	—	—	—	—	—	—	—	—	8
Uncertain	1	—	—	7	—	—	—	—	—	—	—	—	8
	2	6	9	17	2	3	2	1	1	3	2	3	51
Recommendations:													
None	1	6	6	3	2	2	—	1	1	3	2	2	29
Medical	—	—	2	1	—	1	2	—	—	—	—	—	6
Surgical	1	—	1	12	—	—	—	—	—	—	—	—	14
Optical	—	—	—	—	—	—	—	—	—	—	—	—	—
Hospital Supervision	—	—	—	1	—	—	—	—	—	—	—	1	2
	2	6	9	17	2	3	2	1	1	3	2	3	51

TABLE XI.

ANALYSIS OF CASES CERTIFIED AS PARTIALLY SIGHTED—1955

					Congenital Defect	Myopic Error	Glaucoma	Cataract	Congenital Syphilis	Vascular Diseases	Other Primary Ocular Defects	TOTAL
Number of Cases					3	5	1	6	2	3	2	22
History of Treatment:												
Not known					1	—	—	—	—	1	—	2
Incomplete					—	—	—	1	—	—	—	1
Treatment Refused					—	—	—	1	—	—	—	1
Condition not amenable to treatment					1	—	—	—	—	2	—	3
Successful					—	—	1	3	1	—	—	5
None					1	5	—	1	—	—	2	9
Failed					—	—	—	—	1	—	—	1
					3	5	1	6	2	3	2	22
Prognosis:												
Irremediable					—	1	—	—	—	—	—	1
Likely to Deteriorate					—	—	—	—	2	2	1	5
Stationary					3	—	—	—	—	—	1	4
Potentially remediable					—	1	—	3	—	—	—	4
Uncertain					—	3	1	3	—	1	—	5
					3	5	1	6	2	3	2	22
Recommendations:												
None					3	1	1	3	1	1	1	11
Medical					—	1	—	—	1	—	1	3
Surgical					—	1	—	3	—	1	—	5
Optical					—	—	—	—	—	—	—	—
Hospital Supervision					—	2	—	—	—	1	—	3
					3	5	1	6	2	3	2	22

## OPHTHALMIA NEONATORUM

(i) Total number of cases notified during the year	4
(ii) Number of cases in which :—	
(a) Vision lost	Nil.
(b) Vision impaired	Nil.
(c) Treatment continuing at end of year	Nil.

In pursuance of the provisions of Section 29, the Welfare Services Committee, through the agency of the Hull and East Yorkshire Institution for the Deaf and Dumb, made arrangements for the general welfare of the Deaf and Hard of Hearing totalling 331 persons.

The following information has kindly been supplied through the Director of Welfare Services by the Rev. N. Dickinson Hennessy, Chaplain-Superintendent of the Hull and East Yorkshire Institution for the Deaf and Dumb.

The total number of registered Deaf on the 31st March was 253, classified under the following age groupings:

	Males	Females
16-20 . . . . .	11	7
21-50 . . . . .	80	56
51-64 . . . . .	29	15
65 and over . . . . .	19	36
	—	—
	139	114
	—	—

The total number of Hard of Hearing on the register on 31st March was 78, classified within the following age groupings:

	Males	Females
16-20 . . . . .	—	—
21-50 . . . . .	13	10
51-64 . . . . .	11	24
65 and over . . . . .	3	17
	—	—
	27	51
	—	—

The total number of Deaf and Hard of Hearing placed in employment from 31st March, 1954 to 31st March, 1955 is 35.

## GENERAL HEALTH SERVICES

*Open Spaces.* Information supplied by the General Superintendent of Parks, etc., shows that there are in the city and immediately adjoining it, approximately 861 acres of Public Parks, Gardens, Recreation Grounds and open spaces owned by the Corporation; and particulars kindly furnished by the Chief Education Officer indicate other open spaces to include sites controlled by the Education Committee and prepared for school playing fields, of an area of 273·2 acres. Additional sites not prepared for this purpose total 200·7 acres.

*Public Baths, Wash-houses, etc.* The City Engineer has supplied the following particulars of attendances at the public baths and wash-houses during 1955 :—

Swimming Baths	....	....	....	....	415,961
Slipper Baths	....	....	....	....	161,782
Electro Medical, etc.	....	....	....	....	14,536
Washhouses....	....	....	....	....	87,752
					<hr/>
					680,031
					<hr/>

The total attendances for the years 1954 and 1953 were 619,694 and 770,704 respectively.

*City Mortuary.* The public mortuary is situated in a disused burial ground in Castle Street. A properly equipped post-mortem room is attached and 377 post-mortem examinations were carried out there in 1955.

Inquests were held at the Coroner's Court, 181 George Street, and Dr. Philip Science, Her Majesty's Coroner for the City, has kindly furnished the following statistics:

	1955	1954
Inquests and post-mortems (including post-mortems where inquests were found to be unnecessary)	663	652
Enquiries, etc., in connection with which there were no post-mortems	146	93
	<hr/>	<hr/>
	809	745
	<hr/>	<hr/>
Inquests with Jury, exclusive of adjournments	35	37
	<hr/>	<hr/>

Bodies accommodated at :

City Mortuary	...	...	...	...	390	376
Hospitals, etc.	....	....	....	....	419	369
					—	—
					809	745
					—	—

*Disposal of the Dead.* The General Superintendent of Parks, etc., has submitted the following information regarding cemeteries :—

Total area of cemetery land	....	....	....	....	....	162 acres
Area in use for interments	....	....	....	....	....	104 „
Area reserved for cemetery extensions but used for other purposes	....	....	....	....	....	58 „

The present accommodation for the disposal of the dead is considered to be adequate for a number of years.

*Cremation.* The Crematorium is on a site adjoining the Hedon Road Cemetery. It was the first Municipal Crematorium in the country and was opened on the 2nd January, 1901, the first cremation taking place on the 7th January of the same year.

Since the 14th November, 1939, no fee has been charged by the Corporation in respect of the cremation of the remains of Hull residents.

In Kingston upon Hull the number of cremations annually continues to increase.

<i>Period</i>							<i>No. of Cremations</i>
1901-1952	....	....	....	....	....	....	12,063
1953	....	....	....	....	....	....	1,302
1954	....	....	....	....	....	....	1,370
1955	....	....	....	....	....	....	1,512
							—
<b>Total</b>	....	....	....	....	....	....	16,247
							—

## EPILEPTICS AND CEREBRAL PALSY

A cerebral palsy clinic is held from time to time at the Park Avenue Special School and children of school age and of pre-school age are seen there for diagnosis and treatment. These include not only those attending the school but others who are treated as out-patients.

The existence of the clinic is well known and cases are referred by general medical practitioners, hospitals and the Maternity and Child Welfare section of the Health Department.

No special arrangements exist for the treatment of epilepsy but examination for diagnosis can be made at the school clinics.

Most of the epileptic children attend ordinary schools except when this is not possible owing to other physical or mental handicap and except for a very small number who, owing to bad home conditions, are resident in epileptic colonies.

Normally, arrangements for the treatment of both epileptics and cerebral palsies are made by the general practitioner.

The following three tables show the incidence of epilepsy and cerebral palsy so far as it is known.

#### *Epileptics*

Attending ordinary schools	....	....	....	....	....	....	41
Attending special schools—							
Day educationally subnormal	....	....	....	....	....	....	3
Residential educationally subnormal	....	....	....	....	....	....	4
Physically handicapped	....	....	....	....	....	....	1*
Open Air	....	....	....	....	....	....	4
Out of School	....	....	....	....	....	....	0
Resident in epileptic colonies	....	....	....	....	....	....	0

\*This child is also spastic.

#### *Cerebral Palsies*

Pre-school children	....	....	....	....	....	....	8
Attending ordinary schools	....	....	....	....	....	....	9
Attending special schools—							
Physically handicapped	....	....	....	....	....	....	32†
Educationally subnormal	....	....	....	....	....	....	2
Out of school	....	....	....	....	....	....	0

†One child is also epileptic.

Of the total number of mental defectives under Statutory supervision :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Number who are subject to epilepsy	17	31	48
Number who suffer in varying degrees from cerebral palsy	16	15	31

PART II

SANITATION

HOUSING

FOOD INSPECTION



## SANITARY CIRCUMSTANCES OF THE AREA

*Water.* The Water Engineer and Manager has kindly supplied the following information.

The supply throughout the year has been satisfactory in quality and quantity.

Bacteriological examinations are taken frequently and chemical examinations at varying intervals. The chloramine process is in operation, the normal dosage being 0.15 parts per million.

The water supplied is not liable to have plumbo-solvent action.

All water leaving the pumping stations is bacteriologically pure and when new mains are laid or alterations take place, such mains are sterilized before the water is put into circulation.

The number of dwelling-houses and the estimated population supplied in the City and County of Kingston upon Hull area are 92,887 and 299,172 respectively. All the supplies taken from the Corporation's supply are direct main connections.

*Sampling of Water.* Samples of the City's water supply are taken regularly from various points of the City and submitted by the City Analyst and Bacteriologist to the presumptive Bac. Coli. Test. The results of his examinations throughout the year will be published in his Annual Report. He also examines the water for residual chlorine.

During the year a complaint was received regarding a water supply to certain industrial premises. The result of samples taken showed that in one instance the water from storage cisterns was not fit for human consumption, and steps were taken to ensure it was not so used.

*Drainage and Sewerage.* In some cases during the year where drainage systems could not easily be traced by the normal methods employed by the Department, an underground track locator owned by the Telephones Department was used. Steel rods were inserted in the drain pipes and an electric current applied. By means of a current measuring instrument, the operator could locate the position of the rods when standing on the ground above. Fruitless excavations are consequently obviated and both time and expense saved thereby. I am indebted to the Telephones Manager for his co-operation in connection with this work.

In 1953, a large sewer was found beneath a house in Russell Place, and in the grounds of the former Kingston College, Beverley Road. As far as could be ascertained, the sewer had been constructed in the early part of the nineteenth century. Following consultations with the City Engineer, the Works Committee adopted the sewer as one to be maintained by the Local Authority. During the year under review, the City Engineer's Department has entirely reconstructed the sewer and adequate means for inspection have been provided.

The following particulars are submitted from information supplied by the City Engineer.

Work on the several projects forming part of the West Hull and Haltemprice Joint Main Drainage Scheme has continued throughout the year. The construction of the sub-structure of the new pumping station has been completed except for the sealing of certain leaks through the concrete walls, and the contractor has been endeavouring to deal with the problem by pressure grouting, employing a specialist Sub-contractor for this work. The contractor for the super-structure of the station commenced work in January and the shell of the north wing of the station has been completed and the construction of the east wing is well advanced. Installation of mechanical and electrical plant has been virtually completed in the Screenings Section and is now proceeding in the northern wing of the station as rapidly as the building operations permit. Various finishing work will remain to be completed after the mechanical plant has been installed, and it is not anticipated that the station will be commissioned until early 1957.

The 8ft. diameter Western Branch Trunk Sewer extending a distance of approximately 4,645 lin. yds. from the new pumping station in West Dock Avenue to First Lane, Hessle, has been completed except for certain reinstatement and connections. This sewer has been constructed partly in open cut and partly in tunnel and ground conditions have necessitated the use of compressed air in the tunnel sections. This trunk sewer cannot be brought into use until the new pumping station is commissioned but to enable the available storage capacity of the First Lane Trunk Sewer in Haltemprice and a part of the Western Branch Trunk Sewer to be utilised, a temporary pumping station has been constructed over the latter sewer near Anlaby Park Road South. This station which is now in operation, pumps sewage from the new deep trunk sewers into the existing Hessle and Anlaby Outfall and will enable approximately 350 houses to be erected in West Hull in advance of the completion of the new pumping station in West Dock Avenue.

A contractor for the first section of the Northern Branch Trunk Sewer has been appointed and work commenced in July. This section extends from the new pumping station via Harrow Street, The Boulevard, West Park and Fairground

to Spring Bank West near its junction with Walton Street, and consists mainly of 10ft. 9in. dia. sewer, the total length of sewer being approximately 2,700 lin. yds. Construction will be in tunnel throughout and it is anticipated that compressed air will be necessary. The completion of this first section of the sewer will assist in the elimination of the Walton Street drainage bottleneck and its construction is expected to take until mid 1958. The remaining sections of the Northern Branch Trunk Sewer from Spring Bank West to near the northerly City boundary are at present being designed and subject to Ministry of Housing and Local Government approval, it is hoped to commence constructional works during 1956. The remaining sections comprise approximately 4,600 lin. yds. of 9ft. down to 4ft. 6in. diameter trunk sewer and their completion will permit further development in North Hull and the Cottingham area of Haltemprice. In addition various overloaded existing sewers will be relieved, the need for 2 sub-pumping stations eliminated and certain agricultural drains will be intercepted and their flow taken into the trunk sewer.

Restriction of development in certain areas of the City due to the overloaded nature of sections of the existing sewerage system has continued and complete relief can only be achieved on completion of main drainage works.

The Consultant appointed by the Council to investigate alternative methods of draining certain areas in the north of the City by means of separate treatment works has submitted a further report to the Works Committee. No decision has yet been made on this matter except that it has been agreed that if such a method were adopted it would be confined to the drainage of areas east of the River Hull, lands to the west of the river being dealt with by existing main drainage proposals.

Investigations have continued into industrial development in order to prevent or control the discharge of harmful trade effluents into the sewers.

*Watercourses, Streams, etc.* Certain dykes on the outskirts of the city, known to be polluted with sewage flowing into them from the area of an adjoining Authority, have been sprayed on several occasions in order to abate the nuisance which arose, partly from smells and partly from mosquitoes.

This work was done in co-operation with the adjoining Local Authority.

During the winter a large area of low lying land adjoining one of the docks was found to contain mosquito larvæ. The land belonged to the British Transport Commission and was, with the Commission's co-operation, sprayed with larvicide.

There was a reduction in the number of complaints received concerning mosquitoes and no doubt the work mentioned above contributed towards this result but the largest single factor was probably the exceptionally dry summer.

An investigation into pollution of the Lambwath Stream revealed that drains from a school canteen kitchen had inadvertently been connected to a surface water system, instead of to the ordinary sewer. The surface water discharges into Lambwath Stream. The school canteen kitchen waste has now been connected to the sewer.

Complaint was received of oil being discharged into Cottingham Beck. Investigations showed that this was due to a burst pipe allowing creosote pitch to run into the surface water connection to the Beck. Steps have been taken to prevent any recurrence.

Other complaints were received regarding the condition of the Beverley and Skidby Drain. This arose from stagnant water not having an effective flow.

*Public Cleansing.* The Cleansing services of the City are the responsibility of the Public Cleansing Superintendent who has supplied the following information appertaining to the main functions of his Department.

#### Refuse Collection and Disposal:

	<i>Loads</i>	<i>Tons</i>
Total domestic and trade refuse collected	48,920	71,292
Disposal by separation and incineration	41,462	60,072
Disposal by controlled tipping	7,458	11,220
	<hr/> 48,920	<hr/> 71,292
Waste paper collected by special vehicles	1,189	420
Food Waste collected and converted into animal feeding-stuff	582	453
Refuse delivered by private traders and disposed of as follows:		
By separation and incineration	963	360
By controlled tipping	2,568	3,013
	<hr/> 3,531	<hr/> 3,373
Total refuse dealt with	54,222	75,538

Total materials disposed of by means of controlled tipping:

Refuse collected by the Department	....	7,458	11,220
Refuse delivered by private traders	....	2,568	3,013
Residual materials from Refuse Disposal Plant (Dust, Clinker, Debris, etc.)	....	11,341	35,180
Street Sweepings and gully detritus	....	3,350	6,728
		<hr/> 24,717 <hr/>	<hr/> 56,141 <hr/>

For the purpose of refuse collection, the City is divided into 33 districts and approximately 202 men and 64 vehicles are engaged on this class of work.

The price paid for salvage paper increased during the year and the free collection of this commodity was reintroduced in an attempt to gain higher revenue from this source. Total sales amounted to 1,617 tons resulting in an income of £14,078.

The demand for concentrated food waste continued to decrease and it became necessary to cease this operation in June, 1955.

During November, 1955, a supply of steam was piped from the Refuse Disposal Plant to an adjoining factory and this will again increase the annual income and be offset against the cost of refuse disposal.

*Street Cleansing.* By the cessation of Food waste collection by Street Cleansing staff, the number of sweepers employed was reduced to 118. These men together with 4 mechanical sweeping machines sweep some 253 miles of streets and roads within the City, either once, twice, three times, or four times weekly, or daily according to circumstances.

71,456 gullies were cleansed during the year by 5 mechanical gully emptiers.

Snow clearance is the responsibility of the Department and throughout the winter, night services of radio fitted sweeping machines are maintained in order that quick switch over may take place from sweeping to the elimination of frost and dangerous conditions on the roads by the spreading of grit, salt and sand. During and after snow falls these services are continued day and night.

*Public Lavatories and Conveniences.* There are seven attended conveniences and 42 unattended lavatories and urinals situated in various parts of the City. The provision of new conveniences in outlying areas of the City is under consideration and it is hoped that one or two of these will be completed in the current financial year.

Total staff of the Public Cleansing Department at 31st December, 1955, was 595 men and 100 mechanical vehicles.



## SANITARY INSPECTION OF DISTRICT

This section of the Report deals with the work of the sanitary inspectors and upon reference to the tables which follow it will be noticed that, compared with last year, the number of complaints received decreased from 10,657 to 10,332. This is a welcome reduction but even the smaller figure is four times as great as the pre-war average. The number of inspections and investigations fell from 76,981 to 64,820 whilst the number of re-visits fell from 19,532 to 19,023—both being the inevitable result of staff shortage. The total number of notices served, letters written, etc., fell from 16,119 to 13,963 but this is more than accounted for by a decrease of 2,518 in the number of informal notices served; the number of statutory notices not only maintained its previously high figure but even showed a slight increase. The number of repairs and improvements effected rose from 20,802 to 21,456; instances where work was carried out by the Corporation in default of owners rose from 734 to 797; and the number of cases referred to the Prosecuting Solicitor rose from 36 to 42.

One other point may be mentioned in connection with the statistical tables. It will be noted that visits respecting infectious disease rose from 2,173 to 4,365. This was largely due to the increased attention now paid to outbreaks of dysentery. Before the war, very little was done with regard to contacts of such cases. Now, when there is an outbreak of dysentery at a school or institution, the inspectors carry out a large number of visits to contacts and suspected cases. This has further reduced the time available for dealing with housing defects, nuisances, etc.

Twelve students are at present undergoing training in the department. Five of these will be eligible to sit for the qualifying examination by June, 1956. The remaining 7 will not be eligible to sit for the examination until 1958 and, if they are successful, three will then have to go away for national service—the remaining 4 having completed their national service before appointment.

The following table summarizes the work carried out during the year by inspectors of the Sanitary and Housing Sections of the Department.





#### SEWERS AND DRAINS

Repeated complaints of rats and smells in a house led to the discovery of this very old brick sewer which passed directly under the house. This photograph shows it, opened up, prior to filling in and reconstruction of the drains.





#### RODENT CONTROL

Within the city there are several large open land drains and rodent control along the many miles of embankments presents special problems. This work was facilitated by use of a boat borrowed from the Parks Department.

TABLE XII

## SUMMARY OF INSPECTIONS AND SUBSEQUENT ACTION

	1954	1955	
Complaints registered	10657	10332	
<i>Inspections and Investigations, etc.—</i>			
Houses (under Public Health Act)	12439	10946	
Houses (under Housing Acts)	1835	196	
Houses (for overcrowding)	287	256	
Passages, Areas, etc.	1110	758	
Keeping of Animals and other statutory nuisances	68	55	
Premises infested with—Rats or Mice	2641	2757	
Insect Pests	2069	1537	
Milkshops and Dairies	641	251	
Ice-cream Premises	773	557	
Caravans	336	291	
Drainage	2848	2066	
Visits re infectious disease	2173	4365	
Miscellaneous	11060	9401	
Offensive Trades Premises	<div><div></div><div>Day</div><div>Night</div></div>	<div><div>5133</div><div>1740</div></div>	<div><div>5175</div><div>1917</div></div>
Smoke Observations and Inspections	2618	2538	
Pigsty Premises	3928	3522	
Common Lodging Houses	<div><div>Day</div><div>Night</div></div>	<div><div>1345</div><div>150</div></div>	<div><div>889</div><div>101</div></div>
Seamen's Lodging Houses	<div><div>Day</div><div>Night</div></div>	<div><div>960</div><div>126</div></div>	<div><div>643</div><div>85</div></div>
Houses-let-in-lodgings	<div><div>Day</div><div>Night</div></div>	<div><div>1748</div><div>249</div></div>	<div><div>1086</div><div>216</div></div>
Factories—General and Sanitary Provisions	1248	591	
Means of escape in case of fire	60	66	
Shops (Observations and Inspections)	14149	10006	
Shops (Sunday Trading)	2101	1427	
Cinemas and Theatres	37	23	
Bakehouses	832	610	
Workplaces	850	499	
Food Preparing premises and Catering establishments	1427	1690	
Totals	76981	64820	
<i>Revisits and Re-inspections—</i>			
Houses (under Public Health Act)	4052	4913	
Houses (under Housing Acts)	613	200	
Factories—General and Sanitary Provisions	629	403	
Miscellaneous	14238	13507	
Totals	19532	19023	







TABLE XIII

## STATUTORY NOTICES SERVED DURING 1955

Act and Section under which served:—	No. of Notices served	No. complied with (including those served in previous years and complied with in 1955)	No. not complied with at the end of 1955	No. of Notices complied with by the Corporation in default of owner (included in Col. (3) )
(1)	(2)	(3)	(4)	(5)
<i>Byelaws—</i>				
Houses-let-in-lodgings	—	1	—	—
<i>Public Health Act, 1936—</i>				
Section 24—Sewers	265	295	42	174
Do. (as amended by Section 49 of the Kingston upon Hull Corporation Act, 1952)	526	540	16	386
Section 39—Drains &c.	113	150	12	30
„ 45—Water-closets	290	281	33	70
„ 56—Paving of : Yards	29	34	10	10
„ Courts	17	30	11	20
„ Passages	37	44	11	24
„ 75—Dustbins	129	131	27	26
„ 93—Nuisances	854	924	170	4
„ 103—Smoke nuisances	2	1	2	—
<i>Prevention of Damage by Pests Act, 1949—</i>				
Section 4—Works ....	3	1	2	—
Treatment	—	—	—	—
<i>Kingston upon Hull Corporation Act, 1952—</i>				
Section 51—Stopped-up drains	162	161	6	53
<i>Housing Repairs and Rents Acts 1954, Section 11—</i>	1	1	—	—
Totals	2,428	2,594	342	797

*Legal Proceedings.* 42 cases were referred to the Prosecuting Solicitor for legal action following failure of the owners to comply with statutory notices served under the provisions of the Public Health Act, 1936. 2 cases outstanding at the end of 1954 were also dealt with during the year. The number of cases in which legal proceedings were taken in 1954 was 36.

In 5 cases the owners carried out the work before summonses were issued, and summonses were withdrawn on payment of costs following satisfactory completion of the work in 31 cases. Adjournments were made in 3 instances because the work was in hand, the summonses being subsequently withdrawn on payment of costs following the abatement of the nuisance.

Nuisance Orders were made in 2 cases.

The remaining 3 cases were still outstanding at the end of the year.

The Prosecuting Solicitor was also informed of 9 persons who had failed to supply information concerning ownership of certain premises as required by Section 277 of the Public Health Act, 1936, and Section 168 of the Housing Act, 1936. In all instances the particulars were furnished after letters of warning.

Details of legal proceedings respecting contraventions of the Food and Drugs Act., etc., and for offences against the Shops Act, will be found in the appropriate sections of the Report.

*Dustbins.* The Council continued under the powers conferred upon them by Section 75 of the Public Health Act, 1936, to supply dustbins to premises where owners had failed to comply with statutory notices. During the year 26 dustbins were supplied and the cost recovered from the owners or occupiers concerned, compared with 37 in the previous year.

*Scavenging of Common Courts and Passages.* It was not necessary to serve on tenants any notices in connection with passages, etc., which had not been regularly swept or kept clean and free from rubbish. In a number of instances, however, accumulations were discovered to have been deposited, mostly in courts, and the offenders were usually found to be builders who had been carrying out repair work at nearby houses. These deposits were removed following informal action by the Department.

*Pigeons, Nuisance from.* The number of pigeons living on buildings within the city is still in the region of several thousands, despite our efforts during recent years.

Section 48 of the Kingston upon Hull Corporation Act, 1930, empowers the Council to trap pigeons believed to have no owners. The birds are caught alive in large traps which are replenished daily with food and water. During the year 1,837 birds were trapped compared with 2,679 in 1954. Of the former number 184 were ringed birds, and after information concerning ownership had been obtained from the National Homing Union, the owners were asked whether they desired the birds



to be returned or destroyed. In most cases the birds were returned to their owners who paid a small fee to cover the cost of transport and feeding during the time the birds had been in the possession of the Local Authority.

Most of the birds breed on the dock premises, and the flour mills situated on the banks of the River. Unfortunately they have tended to spread to other buildings in the City, including some which have recently been erected.

By arrangement, the Public Health Laboratory of the Medical Research Council has examined 116 pigeons during the year. Of this number 115 were found to be healthy birds. In the excepted case *Salmonella enteriditis* organisms were isolated.

*Flooding.* Most of the city is very little above normal sea level, and flooding of cellars and low-lying property frequently occurs at periods of spring tides. On such occasions water backs up through the drains and escapes through cellar gullies, etc., while sometimes there are slight overflows from the River Hull or some of the large open land drains. In November, 1954, very serious flooding occurred over a wide area and about 1,400 houses were affected. As a result of that experience a warning system is now in operation and the police issued several warnings during the year but fortunately the danger passed on each occasion without serious flooding.

## ATMOSPHERIC POLLUTION

Last year I referred to the Beaver Report, which was presented to Parliament in 1954, and gave a summary of its main recommendations. Since then, rapid progress has been made and most of such Committee's proposals have been embodied in the Clean Air Bill, which received its second reading on the 3rd November, 1955.

When the Bill becomes law, it will bring about a complete change of procedure with regard to industrial smoke. Such smoke has hitherto been dealt with under the nuisance provisions of the Public Health Act, reinforced in Kingston upon Hull and many other districts by local bye-laws. Briefly, a local authority could deal with smoke discharged in such quantity as to be a nuisance, but the procedure involved the service upon the offender of an "abatement notice", and only if he failed to comply with such a notice, did the offender become liable to any penalty. Before serving an abatement notice it was necessary to obtain authority from the Council, or a committee with delegated power. If the nuisance was not abated within the time specified in the notice, or if it recurred within a period of six months, legal proceedings could be instituted and it would then be necessary

to prove to the satisfaction of the Court that a nuisance existed. Our local bye-law is of assistance on this last mentioned point inasmuch as it declares that the emission of black smoke for more than two minutes in any period of thirty minutes shall, until the contrary is proved, be deemed to be a statutory nuisance. No local authority has ever secured confirmation of bye-laws relating to smoke of any colour lighter than "black".

Clause 1 of the Bill contains an outright prohibition of "dark" smoke. This means that the emission of dark smoke will render a firm liable to immediate legal proceedings without any preliminary serving of an abatement notice. Dark smoke is defined as smoke which is as dark as or darker than shade 2 on the Ringlemann scale, and that is considerably lighter than black smoke, being approximately 40% black on the shade card.

Industrial smoke which is not "dark" smoke will continue to be dealt with under the procedure laid down for statutory nuisances.

The other major provision of the Bill is that which gives local authorities power to create smoke control areas. Previously, similar powers could only be obtained by going through the difficult and costly procedure of promoting a Corporation Bill, and even then there were financial difficulties to be overcome as all the cost of new fuel-burning appliances required within a smokeless zone fell upon the local ratepayers. The new Bill overcomes both these objections as it enables any local authority (subject to confirmation by the Ministry after a local enquiry) to create smoke control areas, and provides Exchequer grants towards the cost of suitable domestic fuel burning arrangements.

Other provisions which are of particular interest locally relate to smoke from railways and ships.

Certain details of the Bill may be amended during the Committee stage of its passage through Parliament, and so will not be referred to here, but there is little doubt that the main features, as outlined above, will be passed into law during 1956. Local authorities will then have the necessary powers to deal effectively with both industrial and domestic smoke.

The City Analyst has supplied the following information from his monthly records of atmospheric pollution during 1955.

Gauge place at :—	Tons per Square Mile per Month			Total (in tons per sq. mile) for year
	Maximum	Minimum	Average	
(1) Pearson Park	42.2*	11.6*	22.0*	242*
(2) Springhead Golf Course	16.0	5.9	9.9	119
(3) Dunswell Waterworks	14.0	4.5	9.3	111

\* excluding February.

The Department's staff normally includes three inspectors and one assistant inspector who devote their whole time to smoke abatement and the control of offensive trades, but at present they are without an assistant owing to staff shortages affecting the whole inspectorial staff. The following tables indicate the work carried out by these inspectors during 1955:

No. of half-hour smoke observations	1,7960
No. of inspections of industrial premises	742

0 several chimneys may be observed simultaneously.

*Smoke Nuisances :—*

No. of verbal cautions	85
No. of written cautions	43
No. of follow-up letters	13
No. of statutory notices served	2
No. of statutory notices complied with	1*
No. of statutory notices outstanding at end of year	2
No. of nuisances abated	120†
No. of nuisances outstanding but receiving attention at end of year	28

\* including 1 notice served in 1954.

† including 17 outstanding at the end of 1954.

*Improvements to boiler plants carried out at the request of the Department to minimise or obviate nuisances :—*

Alterations to chimneys	53
Stoking and fuel	43
Alterations to boilers and furnaces	59
Total	155

*Plans of trade premises using boiler plants :—*

No. examined	28
No. passed	7
No. requiring alteration before approval	
re chimneys	15
re stokers and fuel	6

44 complaints were received, including 6 of refuse burning, 7 of soot, ash or grit, and 2 relating to houses. Two other complaints referred to smoke from defective brickwork of a chimney at a fish-curing house; the necessary repairs were carried out. Three complaints were concerning ash from the burning of wood refuse on a boiler plant: on a suggestion by this department a mechanical feed was installed and no further complaint has been received. Coal smoke from a large printing works in a residential area was the cause of other complaints, and after

discussions, the company concerned converted the plant to oil fuel. A statutory notice was served regarding excessive smoke emissions from the chimney of a boiler working a steam locomotive crane; a further statutory notice concerned smoke emissions from a low chimney situate near dwelling houses.

Smoke and sulphur emissions from a works scheduled under the Alkali etc. Acts gave rise to representations from a local organisation. At this works the manufacturing process is such that smoke and sulphur dioxide are discharged into the atmosphere. The company concerned have been experimenting over the last 20 years in order to manufacture their product without creating a nuisance. The experiments have reached a point where a small unit can now be erected and put into production. It is expected that the plant will be working before the end of 1956 when it will be of interest to know of its possible future development.

There is good news concerning progress in the reduction of railway smoke. In the past, a considerable amount of smoke has arisen from coal-fired railway locomotives, particularly around the docks and engine sheds, when engines were warming up from cold or idling, or engaged in shunting operations. Now, in pursuance of the new policy of electrification and diesel engines, this nuisance will gradually be reduced. A total of 29 diesel units were operating in the Hull Area at the end of 1955 and this number is to be increased as rapidly as possible.

### NUISANCES FROM INDUSTRIAL DUST

Complaints received	15
Number of observations	345
Nuisances observed	15
Inspections of premises	39
Cautions issued (written or verbal)	15

Fifteen complaints were received during the year concerning dust emissions and these were dealt with as follows:

(a) Wood flour mill. Improvements have been made to the dust arresting plant in order to create a higher efficiency and prevent, so far as possible, the loss of valuable wood flour product.

(b) Box-making works. Sawdust and wood mush were emitted from a cyclone in excessive quantities, due to negligence. A statutory notice has been served.

- (c) Seed crushing mill. On investigation it was found that the dust arrestors on a newly installed foreign plant were the cause of the nuisance. An additional dust arresting plant was installed with satisfactory results.
- (d) Flour mill. The plant at this works was comparatively new but dust was emitted. Alterations of a temporary character have overcome the trouble. A series of improved additional dust collectors are to be installed as quickly as possible, as the dust is valuable feeding material.
- (e) Factory processing cocoa residue. Dust was emitted during the drying of cocoa residue. This matter was discussed with the work's management and it was agreed to seek expert advice. At the close of the year alterations were being made which are confidently expected to abate the nuisance.
- (f) Cement mixing. Dust arose from the feeding of cement into a mixing machine. Improvement was made by partly covering that portion of the plant concerned during the feeding operation.
- (g) Factory using plaster of Paris. Daily swilling of works yard was requested.
- (h) Transport, loading and unloading, etc. Complaints of deposits of wood mush, and of foundry sand carried on an open vehicle through the streets were received. In the former instance the management were requested to refrain from taking in wood mush during windy weather, while in the latter case the company concerned were requested to use covered vehicles, or in the event of an open vehicle being used, to spray the sand with water before allowing it to leave the works. Difficulties with the supply of water for spraying coal when being discharged from a coal hoist were overcome by providing an auxilliary town water supply. Other complaints were received concerning cement dust and metallurgical dust.

The improvements pending at a refuse disposal plant at the close of last year have not yet been carried out but other matters outstanding from 1954 have been dealt with satisfactorily by:

- (i) the introduction of mechanical feeds at 2 wood refuse boiler plants;
- (ii) the renewal of 3 cyclone units;
- (iii) enclosure of part of a bulk cement mixer;
- (iv) improvements to a dust arresting chamber at a rotary drying kiln.

## PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS AND REGULATIONS

*Offensive Trades.* The number of trades classified as "offensive" and operating in the City at the end of 1955 was 16, involving 121 businesses and including 96 premises in respect of which the Corporation's consent operates for a limited period. The following table shows the number of businesses classified according to the trade carried on :—

	1955
Bone Boilers	3
Fat Melters	4
Fat Extractors	3
Tallow Melters	3
Blood Driers	2
Fish Curers	59
Rag and Bone Dealers	21
Gut Scrapers	2
Tripe Boilers	3
Fish Manure Manufacturers	8
Fish Oil Manufacturers	5
Glue Maker	1
Leather Dresser	1
Fellmonger	1
Soap Boilers	3
Tanners	2
	---
	121
	---

Kingston upon Hull is the largest fishing port in the United Kingdom and some of the trades scheduled above deal with by-products of the fishing industry. Other trades, such as fish meal manufacturing, have been developed on an extensive scale, and although this has not been formally declared an offensive trade under the provisions of the Public Health Act, and is therefore not included in the above table, it is undoubtedly the type of business which can give rise to nuisances from effluvia if there is the slightest relaxation in supervision at all stages of production. It is difficult to record the full extent of such work, especially as large quantities of fish for processing are brought into the city by road and rail from other ports, but one factory alone is able to deal with as much as 800 tons of raw fish daily, producing therefrom oil, meal, glue, manure, etc.

During the year, 25 complaints were received, 8 of which were in respect of a works processing waste animal matter. In addition to the existing vacuum fume extractor and condensor plant, the company concerned installed arrangements for odour treatment of fumes given off at the works and no further complaint has been received.



Although the summer was exceptionally hot and dry, only 4 complaints were received of offensive smells from Fish Dock premises. The large fish refuse processing plant which has for many years been responsible for numerous complaints, has worked throughout 1955 under better conditions, and has dealt promptly with the daily intake of fish. Another factor which has contributed to improved working conditions, is that the intake of herring for reduction to oil and meal has been limited by the company in order to prevent accumulation. Also, the improved type of condensor, introduced in 1954, was found to be satisfactory and an additional old type condensor was converted in 1955, thus improving the treatment of fumes given off during processing. At the close of the year the conversion of another condensor was well in hand. About 133,470 tons of fish were processed at this works in 1955.

Smells arising from the process of drying cocoa residue were the cause of complaint. This was overcome by the installation of arrangements designed to kill the offensive odour before discharge into the atmosphere. Complaints were also received concerning offensive smells arising from the processing of whale and fish oils. Fumes from this process were being discharged directly into the atmosphere. In an interview with the management of the company it was agreed that alterations be made whereby fumes from the process could be controlled and passed through a condensor arrangement. If this is not successful, further treatment of the fumes will be affected by scrubber or other agreed method. This work was nearing completion at the end of the year. At another works an additional fume scrubber was required to overcome complaint of smells from an oil residue processing plant.

All premises used for offensive trades are subject to systematic day and night observations. During 1955, 5,175 day and 1,917 night inspections were made of these premises and other places where effluvium nuisances might arise.

11 informal notices were served and there were 78 verbal cautions and follow-up letters.

As a result of representations made by the Department, structural improvements were effected in 38 cases and improved operations to minimise possible nuisances in 5. Nine plans of new premises and plant were examined, none of which required alteration in order to conform with the Department's requirements. 84 contraventions of the Bye-laws were remedied.

*Public Sewers.* Five complaints were received concerning sewers, and upon investigation, 3 of these were found to be due to the smell of normal sewage. The other 2 complaints were in respect of the discharge of an offensive and dangerous effluent into the sewer. The management of the works concerned was inter-



viewed and it was found that a wrong drainage connection had recently been made by a builder's workman, thus permitting the effluent concerned to discharge into the sewer. This was immediately rectified.

*Fried Fish Shops.* 4 applications to establish the business of fish fryer were received. 2 were recommended for approval subject to the execution of certain works but the remaining 2 were not recommended because the premises could not be made suitable for the purpose.

*Pig Keeping.* The number of premises registered as complying with the Local Bye-laws was 222, provided with 765 sties. The figures for 1954 were 234 and 773 respectively.

3,522 inspections were made by the Department's Inspectors. There were 43 contraventions necessitating the service of 17 informal notices, 22 verbal cautions and 4 follow-up letters.

Structural improvements were carried out at 47 sties and cleansing was undertaken at 283 premises at the request of the Department. During the year 37 contraventions were remedied. Rat infestations were dealt with at the request of occupiers in 37 cases.

7 complaints were received, 4 concerning deposits of manure which were satisfactorily dealt with. Two complaints of alleged nuisance were unfounded. One complaint of flies from pig sties which had been enlarged in a residential area, without approval, was dealt with by intensive spraying. This matter was referred to the Town Planning Department who had refused permission to extend the premises.

One case of pigs being kept in contravention of the bye-laws was referred to the Town Clerk. This resulted in the removal of the pigs.

*Common Lodging Houses.* These are governed by local bye-laws which have been designed to ensure good management of such houses, the taking of precautions in cases of infectious disease, the promotion of cleanliness, the limiting of the number of lodgers per room, and the proper separation of the sexes.

At the end of the year there were 47 registered common lodging houses in the City containing 273 bedrooms or cubicles with accommodation for 730 single lodgers and 30 married couples. 889 day and 101 night visits were made. 11 visits were also made to unregistered premises where it was suspected that they were being used as common lodging houses. 62 contraventions of the bye-laws were

found, mostly of a minor character, and there were also 36 contraventions of the provisions of the Public Health Act. 21 letters were sent and 59 verbal cautions were given to the persons concerned. The number of houses on the register at the end of 1954 was 48 providing accommodation for 739 single lodgers and 30 married couples.

61 verminous persons were referred to the disinfecting station for treatment.

At the end of the year the requirements of the bye-laws had been carried out in all but 14 of the above cases and in these steps were being taken by the persons concerned with a view to compliance. 7 contraventions of the Public Health Act were still outstanding at the end of the year.

*Seamen's Lodging Houses.* The comparatively large number of seamen's lodging houses in the City cater for the needs of the many seafaring men who necessarily frequent the port. The houses are licensed and regulated by the local bye-laws originally made under the Merchant Shipping Act to safeguard the interests of seamen. On the whole the houses are well conducted and give rise to no special problems. Seamen of the present day are well paid and their lodging houses compare favourably with most moderately priced hotels. It is, however, necessary to make frequent inspections, mainly to ensure the proper keeping of records and the maintenance of a good standard of hygiene. A number of the smaller houses cater almost wholly for seamen of a particular nationality such as Arabs, Indians, Somalis, etc., but all the large houses, including those run by missionary bodies, provide accommodation for any nationality.

The number of these houses on the register was 26 containing 591 bedrooms or cubicles with accommodation for 805 seamen. Included in these houses is the Victoria Mansions, Great Passage Street, which provides accommodation for 487 men, and the Flying Angel Club, Alfred Gelder Street, providing accommodation for 26 men. The sleeping places at the former consist of 476 cubicles and 11 rooms and at the latter 22 rooms.

643 day and 85 night visits were made. In 34 cases the requirements of the bye-laws were not being carried out and 25 contraventions of the provisions of the Public Health Act were found. 51 verbal cautions were given and it was necessary to serve 16 informal notices. One notice was served under the Public Health Act, 1936, and duly complied with.

At the end of the year 39 of the contraventions of the bye-laws had been remedied and the remaining three were receiving attention. 24 contraventions of the Public Health Act were remedied and the remaining 5 were being dealt with. These figures include contraventions outstanding from the previous year.

*Houses-let-in-lodgings.* For many years houses-let-in-lodgings were subject to control under special bye-laws which fixed responsibility for the cleansing of common staircases, passages, etc., and set out conditions which had to be observed by owners, occupiers and lodgers respectively. These bye-laws ceased to have effect as from the 30th August, 1954, when the Housing Repairs and Rents Act came into operation. Sections 11 and 12 of the Act provide new powers for dealing with such houses. Briefly, if a house is to be occupied by more than one family, it must be reasonably suitable for such occupation. If it is not suitable the local authority may serve a notice upon the person having control of the house, specifying the works required for rendering the premises suitable (including such matters as additional sanitary accommodation, water supply, separate food storage facilities, etc.). As an alternative to complying with these requirements, the person concerned may take such steps as are necessary for securing that the number of individuals or households accommodated on the premises is reduced to a specified figure. During the year 1 such notice was served and resulted in the premises ceasing to be used as a house-let-in-lodgings.

During the year there was an increase of 10 in the number of houses-let-in-lodgings, the total being 303. There were 29 new additions and 19 houses ceased to take lodgers.

The total number of visits paid to houses-let-in-lodgings was 1,302 including 216 at night. 101 notices were served and 60 verbal cautions or second letters were given or sent in respect of contraventions of the Public Health Act. 104 notices were complied with. 16 notices outstanding at the end of 1954 were complied with in 1955.

*Hackney Carriage Bye-laws.* One of the requirements of these bye-laws is that the proprietor or driver of a hackney carriage who conveys in the carriage the dead body of any person, shall notify the fact to the Sanitary Inspector of the Council. During the year two cases were reported to this Authority, but in both instances there was nothing of an infectious character and no action was required.

*Factories Act, 1937.* The provisions of the Factories Act are enforced partly by H.M. Inspectors of Factories, and partly by local sanitary authorities. In factories where mechanical power is used local authorities enforce the requirements of Section 7 of the Act, and the Sanitary Accommodation Regulations, 1938, to ensure that suitable and sufficient sanitary accommodation is provided and maintained. In factories where mechanical power is not used, local authorities deal with sanitary accommodation and also cleanliness, overcrowding, temperature, ventilation and drainage of floors. In addition, factories of all classes are subject to the general public health law with regard to nuisances, etc., and factories processing food are subject to various provisions of the Food and Drugs Act.

The local authority is compelled by the Act to keep Registers of all factories situated within their district. At the end of the year there were 425 non-power and 1,516 power factories on the Corporation's Register. 1,053 inspections, including 392 re-inspections, were made of factories and 300 contraventions were found. The infringements mainly comprised unsatisfactory conveniences.

Under the provisions of Section 34 of the Factories Act, 1937, it is the duty of occupiers of certain factories to make application to the local authority for a Certificate to the effect that their premises are provided with sufficient means of escape in case of fire. During the year 14 applications for certificates were received and 9 certificates were issued. Additional means of escape were found to be required at 6 factories. There were 7 factories where the means of escape were found to be unsatisfactory; the number put in order was 7, including one from the previous year.

Plans for 225 new factories were submitted for examination. 9 such plans did not show sufficient means of escape in case of fire and in 12 other cases suitable sanitary conveniences were not indicated. In all cases the owners or architects were notified and undertook to comply with the requirements of the Authority.

*Homework.* Section 110 of the Factories Act requires occupiers of factories carrying out specified trades who employ workmen or contractors working outside the factory to keep in prescribed form and manner lists showing the names and addresses of all such persons. These persons are known as outworkers and a list of them must be sent to the district council during the months of February and August in each year. The main purpose of this Section of the Act is to ensure that the health of persons so employed is safeguarded and the Local Authority has power to forbid homework being carried on at premises where there is a case of infectious disease. This power is particularly applicable to trades dealing in wearing apparel and the Minister has power to include other types of work if he considers this to be desirable.

This Authority has on its register 81 firms who employ a total of 257 outworkers, 138 of whom are engaged in the making, cleaning, alteration, etc., of wearing apparel. Periodical inspections of their premises were carried out during the year.

All other provisions of the Factories Acts are enforced by H.M. Inspectors of Factories who are employed by the Ministry of Labour and National Service. These inspectors work in close co-operation with the sanitary inspectors of local authorities.

The following summary gives details of inspections made under the Factories Act and defects found : —

	<i>No. of Inspections</i>	<i>Notices Served</i>	<i>Prosecutions</i>
Factories (with mechanical power) .....	657	14	} Nil
Factories (without mechanical power) .....	328	6	
Works of Building .....	64	—	
Work of Engineering .....	4	—	
	<hr/> 1,053	<hr/> 20	

The above figures include 66 inspections of fire escapes in power factories. (Visits to Bakehouses are recorded elsewhere.)

#### SUMMARY OF DEFECTS FOUND :

<i>Details</i>	<i>No. of Defects</i>	
	<i>Found</i>	<i>Remedied</i>
Want of cleanliness (Section 1) .....	1	1
Overcrowding (Section 2) .....	1	1
Unreasonable temperature (Section 3) .....	3	2
Inadequate ventilation (Section 4) .....	1	—
Ineffective drainage of floors (Section 6) .....	1	2
Other Nuisances (P.H.A. 1936) .....	41	48
Sanitary Accommodation (Section 7)—Insufficient .....	5	13
Unsuitable or defective .....	50	34
Not separate for sexes .....	21	12
Other offences (excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Power) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937) .....	—	—
Totals .....	<hr/> 124	<hr/> 113

*Shops Act, 1950.* This Act controls hours of closing, conditions of employment of shop assistants and Sunday Trading.



At the 31st December, there were 6,968 shops on the register in which 4,162 males and 7,001 females were employed. 1,260 shops were inspected and 949 contraventions were found principally in relation to failure to keep prescribed records and notices. On re-visits being made, 816 contraventions had been remedied and the remainder were receiving attention. 75 plans of shops or other premises were submitted for examination in the light of the Shops Acts and 1 of these was found to require amendment.

10,006 observations were made of shops, 26 of which were found to be open after the prescribed closing hours. 376 notices were served and 58 verbal cautions given; 331 notices and 18 verbal cautions were complied with.

1,427 inspections were made of shops open on Sundays at 81 of which contraventions were found. 62 were subsequently remedied as a result of cautions to the persons concerned. Legal proceedings under Section 47 of the Shops Act, 1950, were taken against a shop keeper for failing to observe the provisions of the Act in regard to the sale of non-exempted goods on Sunday. The person concerned pleaded guilty and a fine of £5 was imposed.

At the end of the year there were 926 shops which opened for the purpose of trade on Sundays, including 7 shops occupied by persons observing the Jewish Sabbath.

*Cinemas and Theatres.* 23 inspections were made of Cinemas and Theatres. At one the sanitary accommodation was unsatisfactory; it was later put in order. At another the arrangements for serving tea and refreshments were unsatisfactory and these arrangements were discontinued.

*Rag Flock and other Filling Materials Act, 1951.* This Act is designed to secure the use of clean filling materials in upholstered articles and other articles which are stuffed and lined. It requires registration by the Local Authority of all premises (with certain exceptions) where there is carried on any form of upholstering and the licensing by the Local Authority of any premises at which rag flock is either manufactured or stored prior to delivery to registered premises. The Regulations of 1951 prescribe standards of cleanliness for each kind of filling material to which the Act applies and also the form in which records must be kept by the occupier of both registered and licensed premises.

At 31st December, 1955, 20 premises (occupied by 19 persons or firms) were registered by the Local Authority and 4 premises were licensed for the storage of rag flock. There is no establishment in the City where rag flock is manufactured. All these premises were systematically inspected during the year and no contraventions were discovered.

36 samples of filling materials to which the Act applies were taken and all were found to conform to the standard of cleanliness prescribed by the Regulations.

*Food and Drugs Act, 1938 Sections 13 and 15. Precautions against contamination of food, and Bye-laws re Handling, Wrapping and Delivery etc. of Food.* The Inspectors of the sanitary section of the department who are responsible for carrying out the provisions of the Factories Act and the Shops Act also carry out inspections of food premises so as to ensure that the requisite precautions against the contamination of food are taken. Their work, as shown below, is in addition to similar work carried out by other inspectors of the department and recorded elsewhere in this report. During the year 1,690 inspections of food premises were carried out resulting in 267 contraventions being found. 15 letters of caution were sent and 205 verbal cautions were given. 236 contraventions were remedied and in all instances the occupiers of the premises concerned were sent or handed abstracts of the requirements of the Act and local bye-laws relating to food premises. The outstanding contraventions were receiving attention at the end of the year. The Inspectors also gave individual advice and instruction to persons engaged in the handling of food. Included in the above figures are 610 inspections of bake-houses of which there are 145 on the Register.

*Refreshment Houses.* At the 31st December, there were 42 refreshment houses licensed under Section 6 of the Refreshment Houses Act, 1860, to keep open for public refreshment, resort and entertainment at any time between 10 p.m. and 5 a.m. These premises were visited frequently.

*Workplaces.* Section 343 of the Public Health Act, 1936, defines a workplace as not including a factory or workshop, but any place in which persons are employed otherwise than in domestic service. There were 597 such places on the Register at the end of the year and 499 inspections were made. The premises were found generally to comply with the provisions of the Public Health Act.

*Tents, Vans and Sheds.* The licensing provisions of the Public Health Act, 1936, with regard to tents, vans and movable dwellings do not operate in the City as we possess special powers under Section 45 of the Kingston upon Hull Corporation Act, 1930. Special powers are also possessed under Local Bye-laws for regulating the cleanliness and sanitary conditions of tents, vans or sheds used for human habitation, for preventing the spread of infectious diseases and for the prevention of nuisances. The Act provides amongst other things, that no tent, van, shed or similar structure used or intended to be used for human habitation shall be placed or kept on land situate within the City without the previous approval of the Corporation and, by this means, the Local Authority are able to ensure that the requirements of the bye-laws are complied with.



*Certificates of Disrepair.* On the 30th August, 1954, the new Housing Repairs and Rents Act came into operation. Under this Act a landlord who has spent an amount equal to three times the statutory repairs deduction on repairs during a period of one year (or six times the statutory repairs deduction over a period of three years) may increase the rent by a certain sum to be calculated in accordance with the Act. This sum will vary in different cases but it can never exceed twice the statutory repairs deduction; nor can it be such as to cause the total rent to exceed twice the gross value of the house. Moreover, if the landlord wishes to take advantage of these provisions for increasing the rent he must first ensure that the house is (a) in good repair, and (b) reasonably suitable for occupation, and he must keep it in that condition so long as he is imposing the "repairs increase".

If a landlord fails to fulfil these last-mentioned requirements, the tenant can apply to the local authority for a certificate of disrepair which, if granted, will enable him to withhold the amount of the repairs increase, as in the case of the earlier legislation. If such a certificate is granted for a house which is subject to the "old control" (i.e. a house which has been under control since before 1939), it entitles the tenant to suspend not only the new repairs increase but also the 40 per cent permitted under the earlier Acts.

The publicity accorded to the new Act, together with the imposition of the permitted increases, re-awakened interest in the question of certificates of disrepair and during the year 177 application forms were issued, 149 were returned duly completed and 133 certificates were granted. In 13 instances certificates were not granted because the necessary repairs were carried out by the landlords before the cases could be submitted to the Committee, and in 3 other cases there were insufficient grounds for issuing a certificate. The remaining applications were receiving attention at the year end. Landlords made 83 applications for revocation of certificates following completion of repairs; 75 of these were granted and 8 were awaiting action at the end of the year.

*Hull Fair.* During the period of the Fair the vans on the ground and in the vicinity were, as usual, visited daily by the Sanitary Inspectors who enquired as to the state of health of the occupants. There were no cases of infectious diseases discovered. Compared with the previous year there was a slight decrease in the number of vans and in the number of adults and children occupying them. The comparative figures are set out below:

Year	Persons in occupation		
	No. of Vans	Adults	Children
1953	301	674	176
1954	295	573	205
1955	273	569	190

No tents or booths were found to be used for sleeping purposes and there was no overcrowding.

Dustbins, swill-bins and pail closets were provided at various points on the ground and these, along with the chemical closets and dustbins provided by the showmen themselves, received regular attention by the public cleansing Department. There were no complaints on this occasion about the siting of the various conveniences.

Day and evening observations were made of the sanitary conveniences provided on the Fair Ground and in Walton Street and the Health Visitors assisted in the evenings by inspecting the ladies section and water-closets attached to private houses advertised for public use as ladies' lavatories. No obstructions to the water-closets, etc. were reported.

Observations were kept on ice-cream and other food stalls in the Fair Ground and in Walton Street and several verbal cautions were given by the Inspectors where necessary.

The Lodging-house Inspectors visited 543 houses in the streets adjacent to the Fair and found 31 houses providing temporary accommodation for 57 lodgers (38 males and 19 females). There were no contraventions of the Public Health Act or Local Bye-laws and the houses were found to be clean and well conducted.

157 diesel or petrol generating units were assembled on the Fair Ground compared with 169 last year. Prior to the commencement of the Fair, owners of all generating plants were informed of the regulation requiring exhausts to be carried to a height of 15 feet above ground level. Coke fuel was used by 2 steam locomotives, 7 fish and chip saloons and 4 chestnut stalls. There were also 28 refreshment and pea stalls utilising calor gas. It was necessary to serve 11 informal notices and 21 verbal cautions were given, mainly in regard to exhausts. The notices, both verbal and written, were complied with, except in the case of 2 units in the same ownership, the exhausts of which had not been raised as required. A total of 315 inspections and visits were made by the Smoke Inspectors who reported the general atmospheric conditions throughout the period of the Fair to be good.

The Sampling Officer under the Food and Drugs Act took 29 samples of foodstuffs at the Fair Ground and submitted them for analysis under the Food and Drugs Act. The foodstuffs included such commodities as toffee apples, brandy snap, sweets and other confections. The Public Analyst gave satisfactory reports on 27 of the samples but the remaining 2 were found to be unsatisfactory and appropriate action was taken in these cases.

## PREVENTION OF DAMAGE BY PESTS ACT, 1949.

*Rats and Mice Destruction.* In recent years the importance of the destruction of rats and mice has been recognised by all Local Authorities and by the Central Government. Apart from consuming and damaging large quantities of food stored for the nation's use, rats do untold damage to the structure of buildings by gnawing woodwork, water pipes, etc., and often burrow beneath buildings to the extent of undermining the foundations. Moreover, they are an important factor in the spread of certain diseases, some of which are fatal to human beings.

*Treatment of Dwellinghouses.* The Department employs 8 rodent operatives who undertake treatment of private dwellinghouses, mostly by poisoning methods. The services of the rodent operatives are provided free of charge, the cost being borne equally by the General Rate Fund and the Ministry of Agriculture, Fisheries and Food. The Authority's Sanitary Inspectors are appointed as Officers under the Prevention of Damage by Pests, Act 1949, and they enquire into causes of rat infestation and, where necessary, give advice on the most effective measures necessary for control. They also supervise structural repairs and improvements necessary to make premises rat proof and deal with any special conditions likely to attract or harbour rats.

The following table shows the number of rats and mice killed, classified under the types of property affected, with particulars of the methods of destruction used.

### TABLE XIV.

TYPE OF PROPERTY	No. of rodents killed	No. of properties affected	METHODS OF DETSRUCTION	
			Method	Rodents killed
Dwellinghouses .....	15,889	2,864	Trapping .....	260
Business premises .....	10,286	372	Poisoning .....	29,033
Local Authority property.. (excluding houses)	3,168	96	Gassing .....	77
Agricultural property	27	1		
TOTALS	29,370	3,333		29,307

The total number of rodents destroyed in 1954 was 26,981 and in 1953, 23,069.

During the year, 2,260 complaints, mostly from occupiers of dwellinghouses, were received concerning rat or mice infestations, compared with 1,944 in 195-

These complaints were investigated by the District Sanitary Inspectors who made 2,757 inspections. Informal notices were, in a number of cases, addressed to persons whose premises were rat-infested and it was necessary to serve 3 statutory notices under Section 4 of the Prevention of Damage by Pests Act.

*Rats and Mice Destruction—treatment of Business Premises.* The Department's 8 full-time rodent operatives also deal with business premises.

Treatment, consisting usually of poisoning, is undertaken at the request of owners or occupiers, a charge being made to cover the cost of labour and materials. This is in accordance with the Ministry's request that the scheme shall be self-supporting and no part of the cost is borne by the rates or Exchequer contributions. The methods of poisoning used are in accordance with the recommendations of the Ministry of Agriculture, Fisheries and Food.

The Department continued, on request, to deal with some business premises on a yearly contract basis. Period contracts are not, however, entered into where there is a reasonable chance of securing complete clearance of rats and adequate rat-proofing of premises at one operation. They are confined to premises where this ideal is not practicable, i.e. on railway sidings, fish docks and certain offensive trade premises where there are constant attractions to rats. Even if all rats present at one time are killed off the premises are always open to fresh invasion. In such cases regular treatment is essential and a contract ensures that the Department can carry out the necessary treatment without the constant formality of having to obtain individual orders. Systematic poisoning is usually carried out three or four times during the contract period, although in a few special cases premises are treated more frequently.

The following table shows the treatments carried out in connection with business premises during 1955:

TABLE XV

Infestations treated (including re-treatments)				Total Estimated kill	No. of bodies found	No. of re-treatments carried out	
Reservoir (Over 200 rats)	Major (Between 20 and 200 rats)	Minor (less than 20 rats)	Total			Reservoir	Major
6	138	233	377	10,286 (includes 5,483 mice)	1,502 (includes 954 mice)	1	4



The total number of rodents estimated killed at business premises, and Local Authority property (excluding houses) in 1954 was 13,692.

During the year 473 of the rodents killed were sent for examination to the Public Health Laboratory (Medical Research Council) to determine the state of health of the carcasses. 466 of the rodents submitted were found to be free from disease, and 7 were found to be infected as follows:

<i>Number of Rodents</i>	<i>Type of Salmonella Infection</i>
4	Enteriditis var. dancyz
1	Tennessee
2	Typhimurium

During October several complaints were received by the Department of rats being seen in the gardens of recently erected houses on the Corporation's Bilton Grange Estate. The Sanitary Inspector, on investigation, discovered an extensive infestation in the banks of the Old Fleet Drain which forms part of the boundary between the City and the Holderness Rural District. Owing to the steepness of the drain banks and the thick vegetation growing on them, the task of dealing with the infestation by working from the banks proved impracticable. The drain was too deep for a rodent operative to wade along it, and it was decided to deal with the infestation from a boat. The Parks Superintendent was approached and readily agreed to loan a boat to this Department without charge. By this means, it was found that rat holes and runs were easily accessible and the treatment was successful, the estimated "kill" being 215.

*Eradication of Insect Pests.* During the year the Department was called upon to take steps for the eradication of bed bugs at 2 Council houses, 2 lodging houses and 23 private houses. Disinfestation for fleas was also undertaken at 7 lodging houses, 6 Council houses, 33 private houses and 3 business premises. Spraying with liquid insecticides containing D.D.T. or Gammexane has been adopted for freeing infested houses from bed bugs.

39 treatments, including 13 at business premises, were undertaken for infestation by beetles and cockroaches. Included in this figure of 39 were 2 treatments undertaken for the destruction of wasps at private houses.

Advice was given and suitable insecticides supplied in 2,022 cases where the Department's help had been sought about premises infested with various types of insect pests such as beetles, crickets, silver fish, furniture beetles, ants etc. The number of cases in which insecticides was supplied in 1954 was 1,894.

Of 221 cases of woodworm treated by the department's workmen, 214 were at Council houses and 7 at private premises. 202 re-treatments were carried out by the Department at Council houses where the original infestation had been treated in 1954. This was in accordance with the Department's practice to follow up the more serious cases with precautionary re-treatments even though signs of activity have ceased. Infestations of this nature are invariably a costly item as, in many cases, considerable damage is done before advice is sought by the tenant. For this reason the Department continued its propaganda work as much as possible and attention is always given to the subject in the Health Department's publicity displays. Leaflets giving information about the habits and breeding of woodworms together with details of the best methods of destruction are distributed to the public in appropriate cases.

*Fly Destruction.* During the year the Department continued to arouse public interest in the danger to health, by contamination of food, etc. of the common house fly. Leaflets, giving information on the best method of control were distributed to householders and others by the Sanitary Inspectors, who also gave verbal advice where necessary.



## HOUSING

*New Houses.* The City Architect has kindly supplied the following information with regard to the erection of houses in the City during 1955 :—

TABLE XVI.

Temporary or Permanent	With State Assistance		Without State Assistance		TOTAL
	By Local Authority	By Others	By Local Authority	By Others	
Temporary ....	—	—	—	—	—
Permanent (New)	730	—	—	117	847
Permanent* (Reconstructions)	—	—	—	3	3
TOTALS	730	—	—	120	850

\* These are reconstructions of War Destroyed houses, and the War Damage Commission's payment would be operative.

*Slum Clearance.* The year 1955 may be regarded as a milestone along the road towards better housing, for it was during this year that local authorities were required to submit to the Minister of Housing and Local Government, proposals for dealing with all unfit houses in their districts. Such proposals had to be submitted before the end of August, but in the case of Kingston upon Hull, a comprehensive programme of slum clearance, involving the demolition of 14,768 houses in 15 years, was drawn up and approved by the Council several months before the expiration of this time limit. The Minister's approval, in principle, was received shortly after submission of the proposals.

The programme involved much survey work on the part of our depleted staff of inspectors but they were aided by housing records built up in the past, and assessment of the extent of our local slums presented no real difficulties. The problem is clearly defined; what is now required is effective action which will sweep away these areas of squalor, disease and misery within the period laid down in our programme.

By the end of the year, one small clearance area, comprising 14 houses, had been officially represented to the Housing Committee and made the subject of a clearance resolution, and four other areas had been inspected and were ready for representation.

The following summary shows action taken in respect of individual unfit houses during 1955:

	Number of Houses	
	1955	1954
<i>Represented to Committee—</i>		
Section 11, Housing Act, 1936	45	46
Section 12, Housing Act, 1936	5	1
Section 10, Local Government (Miscellaneous Provisions) Act, 1953	14	4
<i>Orders made—</i>		
Section 11 (demolition)	33*	51
Section 12 (closing)	3	1
Section 11 (undertakings not to use)	—	—
Section 10, Local Government (Miscellaneous Provisions) Act (closure)	10	3
Demolished prior to making of Order	—	—
Awaiting consideration at end of year	28	12
Action deferred	4	5

\*Includes houses represented in 1954.

*Overcrowding.* Prior to the war the speed of rehousing overcrowded families had exceeded additions to the overcrowding register and the percentage of overcrowded families had been reduced to below 1 per cent. The position to-day cannot be represented statistically with any accuracy but, from general observation, it seems clear that the overcrowding figure is considerably higher than the 3 per cent. revealed by the 1936 Survey. The continued housing shortage prevents any action other than the relief of the most serious cases.

During the year, 181 new cases of overcrowding were reported and 175 cases were abated—77 by the City Treasurer and 98 by the Health Department as a result of informal action. There was no application for a licence to permit temporary overcrowding.

## SUMMARY OF INSPECTIONS

*Overcrowding—*

Complaints received	....	....	....	....	....	....	....	....	431
Inspections	....	....	....	....	....	....	....	....	255
Found to be overcrowded (complaints investigated)	....	....	....	....	....	....	....	....	129
Revisits	....	....	....	....	....	....	....	....	968
Found to be overcrowded on revisit	....	....	....	....	....	....	....	....	52
Overcrowding abated	....	....	....	....	....	....	....	....	175
Complete inspections under Housing Act	....	....	....	....	....	....	....	....	309

*Applications for Corporation Houses.* During 1955 the assistance of the Medical Officer of Health was sought in about 150 cases by letter or personal calls at the Health Department to support applications for Corporation Houses on medical grounds.

As in previous years in the majority of cases no medical grounds could be found to warrant the Medical Officer of Health's support even though in many cases families were found to be living in unsatisfactory accommodation. However, the City Treasurer was asked to give consideration on health grounds to the rehousing of 40 families.

These figures do not include cases where overcrowding was the only ground for support. Information on this subject is given on page 75.

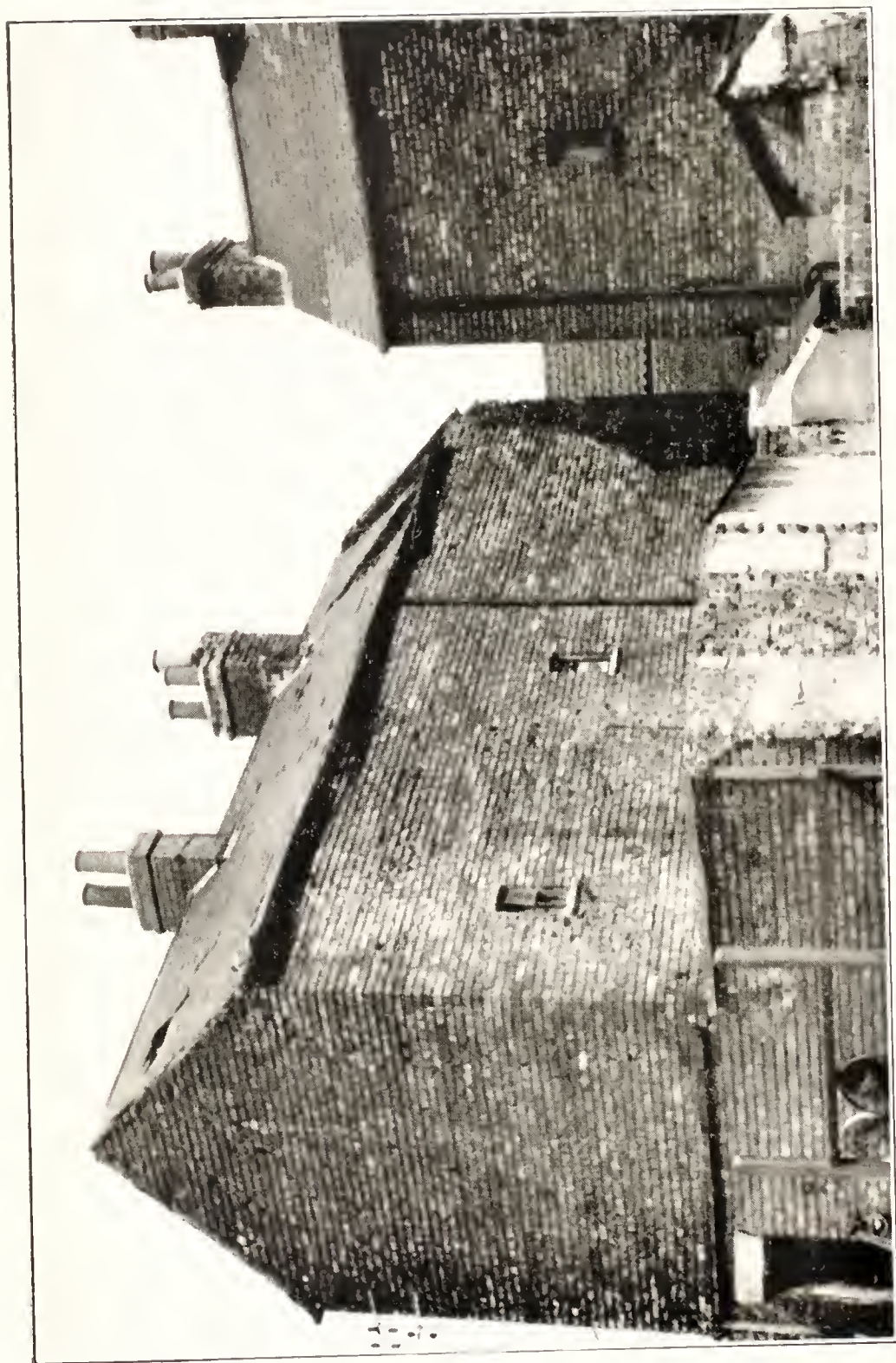
In addition the Chest Physician supplied 118 recommendations for rehousing on medical grounds where a member of the family was suffering from tuberculosis.



#### HOUSING DEFECTS

A striking example of penetrating dampness due to perished brickwork





SLUM CLEARANCE

A "sample" of the houses which became subject to Demolition Orders during the year. Note small windows and perished brickwork of rear walls.

## FOOD AND DRUGS

Considerable time is devoted to the sampling of food and drugs with the object of checking whether they are of the nature, substance and quality required; also (in the case of food) to ascertain whether it is free from harmful bacteria. Premises where food is prepared, stored or sold are subject to frequent inspections so as to maintain a good standard of hygiene with regard to structure, equipment and method.

*Milk Supply.* Milk has always received special attention because it is not only one of our most valuable foods but is also one of the most dangerous. Infection may be derived from the cows, from persons milking the cows, from persons handling the milk or milk vessels at any stage of the journey from farm to house, or from dirty plant or receptacles. Once it has become infected it forms an excellent medium for the growth of many organisms. Milk is also a convenient subject for adulteration—either by skimming the cream or adding water. It is therefore not surprising that a considerable amount of legislation is designed to safeguard our milk supplies throughout all stages of production, processing and distribution.

The amount of milk consumed daily in the City in 1955 was 31,500 gallons, which represents an average daily consumption per person of 0·84 pints. This shows a slight rise over the 1954 figures of 31,100 gallons and 0·8 pints per person.

The following table shows the daily consumption of the different grades of milk during the last quarter of the year under review:

						<i>Amount</i> (gallons)	<i>Percentage</i>
T.T. Farm Bottled	....	....	....	....	....	400	1·3
T.T. Pasteurised	...	....	....	....	...	1,700	5·4
Pasteurised	.	....	....	....		18,200	57·8
Sterilised	....	....	....	....	...	11,200	35·5
						<hr/> 31,500	<hr/> 100·0



These figures, which have been rounded off for convenience, are based on information obtained from the large dairies and producer-retailers in the City.

The Milk (Special Designation) (Specified Areas) (No. 2) Order, 1955, came into operation on the 6th December, 1955. This Order provides for the compulsory use of special designations for retail sales of milk in the city.

There are 7 milk pasteurisation plants of the latest design operating in the City, 5 of them being of the High Temperature Short-time Plate Heat Exchanger type and two (of small capacity) operating on the Lower Temperature "Holder" system. All these plants have been well maintained during the year and samples of the processed milk have given consistently good results when subjected to the Phosphatase and Methylene Blue Tests. Three firms are licensed to process sterilised milk and in these cases also the prescribed test (Turbidity Test) has been satisfied throughout the year.

*The Milk (Special Designation) (Raw Milk) Regulations 1949-54 and the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations 1949-53* provide for the granting of annual licences to persons or firms authorising them to use a special designation in relation to milk sold at or from premises mentioned in the licence, and also, in the case of Pasteurised and Sterilised Milk, for the annual licensing of persons or firms in relation to milk pasteurised or sterilised at premises within the city. The granting of producers' licences under the raw milk regulations is the responsibility of the Ministry of Agriculture, Fisheries and Food. The special designations authorised are "Pasteurised", "Sterilised" and "Tuberculin Tested", although the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations provide, in certain cases, for a processing firm to use the designation "Tuberculin Tested (Pasteurised)" or "Tuberculin Tested (Sterilised)" if they hold the appropriate licences under the Milk (Special Designation) (Raw Milk) Regulations.

The Regulations also provide for the granting by the Licensing Authority of supplementary licences authorising the use in their area of a special designation by persons holding principal licences issued by other authorities.

Regular visits were paid by the Inspectors to persons holding licences under the Regulations, and advice given or suggestions made with respect to improvement of their premises. In all cases the persons concerned readily complied with the requirements of the Department. New applications for licences were carefully investigated by the Department's officers before being considered by the Committee.

The following licences, to operate until the 31st December, 1955, were issued :

1. UNDER THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949—1953.

				<i>No. of persons or firms licensed</i>	<i>No. of premises involved</i>
<i>Dealers' licences—</i>					
"Pasteurised" milk	....			213	276
"Sterilised" milk	.			820	866
				—	—
Totals	....	....	..	1033	1142
				—	—

*Processors' licences—*

"Pasteurised" milk	..	....	....	....	7	7
"Sterilised" milk	....	....	....	....	3	3
					—	—
Totals	....	....	....	....	10	10

2. UNDER THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATIONS, 1949—1954.

*Dealers' licences—*

"Tuberculin Tested" milk	..	..	16	27
--------------------------	----	----	----	----

In addition, 92 licences were issued to persons retailing specially designated milks (mainly "Pasteurised" and "Sterilised") in the streets of the city. In these cases, the persons concerned collected their supplies of milk daily from the large dairies for immediate delivery to their customers, the "empties" being returned each day.

During the year the undermentioned samples were taken for examination under the Regulations, with the following results.

TABLE XVII

<i>Type of Milk</i>	<i>No. of Samples taken</i>	<i>No. of Samples which</i>	
		<i>passed the prescribed tests</i>	<i>failed to pass the prescribed tests</i>
" Tuberculin Tested (Pasteurised) " ....	88	88	—
" Tuberculin Tested " ....	135	118	17
" Pasteurised " ....	137	137	—
" Sterilised " ....	110	110	—
Totals ....	470	453	17

Particulars of the 17 samples of raw designated milk which had failed to satisfy the tests were communicated to the appropriate officers of the area in which the milk had been produced so that suitable action could be taken.

It was not necessary to apply any of the provisions of the Regulations regarding the refusal, suspension or revocation of licences.

*Milk and Dairies Regulations, 1949 to 1954.* Under the provisions of these Regulations the registration of dairy farmers and of dairy farms is the responsibility of the Ministry of Agriculture and Fisheries whilst the registration of milk distributors and other dairy premises is the responsibility of the Local Authority, which is also required to administer those provisions relating to diseases communicable to man.

During the year 976 inspections were made at dairy premises in the City and appropriate action was taken where necessary to maintain compliance with the provisions of the Regulations. Examinations were made of 2,883 milk churns, 200 handcans and 569 vehicles.

The following contraventions of the Regulations were observed :—

(a) Dairy floors in state of disrepair	2
(b) Depositing crates of milk in the streets	3
(c) Failure to display name and address on vehicle	1
(d) Dirty condition of milk bottles	1
(e) Foreign Bodies in milk bottles	8
	—
	15
	—

All the contraventions were remedied after verbal or written cautions.

During the year it was necessary to serve upon a milk producer in the city a notice under Regulation 20 (1) (c) of the Milk and Dairies Regulations, 1949, requiring the milk produced by his herd of cows not to be used or sold for human consumption until it had been subjected to pasteurisation at an approved establishment licensed by the Authority. This action was taken because a sample of milk gave a positive result for tuberculosis when examined biologically. Notification of the action taken was given to the Area Milk Officer and the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food. All the milk in question was immediately sent to one of the local processing firms where it was pasteurised before sale. The notice was subsequently withdrawn, after steps had been taken to ensure the freedom of the milk from any bovine infection.

*Registration of Milk Distributors and Dairy Premises, not being Dairy Farms.* 114 applications for registration were received compared with 137 last year.

The following persons and premises were registered :—

Milk Distributors	....	....	....	113
Dairy Premises	....	....	....	1
				—
				114
				—

At the end of the year there were 915 milk traders on the register, the majority being persons carrying on small businesses of a general nature and retailing small quantities of milk for the convenience of their customers.

The number of dairy premises on the Corporation's Register at the end of 1955 was 36.

*Examination of Milk for Tuberculosis.* Examinations of milk for Tuberculosis are undertaken by the Director of the local Public Health Laboratory Service. 373 samples were submitted for examination by the inoculation of guinea pigs. Positive results were obtained from 15 samples, negative reports were received in respect of 334, and in the remaining 24 instances the results were abortive due to the death of the guinea pigs after inoculation. In connection with the positive samples, the Ministry of Agriculture and Fisheries Veterinary Service carried out investigations at the premises of 15 cow-keepers. In 11 cases, the diseased animals were either slaughtered or found to have been sent for slaughter and in 4 instances no diseased animal was found.

*Brucella Abortus.* Examinations of milk for *Brucella Abortus* are undertaken by the Director of the Public Health Laboratory Service. During the year 324 samples of milk were submitted for examination and positive results were returned in respect of 7 samples; the remaining 317 samples were satisfactory. The Medical Officer of Health for the district in which the milk was produced was notified of all the positive results and arrangements were made for all the infected milk to be heat-treated prior to its sale or use for human consumption.

*Dirt in Milk.* No sample was reported as dirty.

*Mastitis in Cows.* During the year one notification was received from the Divisional Inspector of the Ministry of Agriculture and Fisheries that a cow in a herd within the City was suffering from Mastitis. A notice was served on the owner concerned prohibiting the sale for human consumption of milk from the affected cow, or its use in the manufacture of milk products for human consumption.

*Public Health (Condensed Milk) Regulations, and Public Health (Dried Milk) Regulations, 1923 and 1943.* 24 samples of condensed milk were submitted for analysis during the year. All satisfied the requirements of the Regulations. No samples of dried milk were taken.

*Registration of Ice-Cream Premises.* 78 applications were received for registration of premises under Section 14 of the Food and Drugs Act, 1938, compared with 81 in 1954. All the applications were for the sale of ice-cream. 54 of the applications were granted unconditionally, 14 were approved by the Local Authority subject to the applicants concerned furnishing written undertakings to carry out certain work or to observe certain conditions in order to comply with the requirements of the Act, and 6 applications were withdrawn. In 4 instances applications were not approved owing to the nature of other businesses carried on at the shop, e.g., sale of root crops, etc.



Several cases arose where sales of ice-cream were being conducted under conditions which did not satisfy the requirements of the Food and Drugs Act, etc., but they were mostly minor offences and not sufficiently serious to justify revocation of registration; in these cases the persons concerned, on being cautioned, either ceased to sell ice-cream or furnished undertakings to observe certain conditions.

At the 31st December 1955 there were 939 premises on the register, 15 for manufacture and/or sale, 4 for storage, and 920 for the sale of ice-cream.

The Methylene Blue Test is still the official one used to determine the cleanliness and bacteriological condition of samples of ice-cream. Grading is determined according to the time taken to decolourise the Methylene Blue added to the samples, which are classified in Provisional Grades, I, II, III and IV in order of merit. 46 samples of ice-cream taken during the year and submitted for examination were placed in the following grades:

Provisional Grade I	....	34
II	....	9
III	....	1
IV	....	2
		<hr/>
		46

In all cases where samples were placed in Grades III or IV the vendor's premises were visited and suggestions made so as to secure better results.

*Standard for Ice-cream.* The Food Standards (Ice-cream) Order, 1953, now requires that ice-cream shall contain not less than 5 per cent of fat, 10 per cent of sugar and  $7\frac{1}{2}$  per cent milk solids other than fat. During the year 46 samples of ice-cream were submitted for analysis under the Food and Drugs Act, 1938. All the samples conformed with the standard.

*Ice-cream (Heat Treatment, etc.) Regulations, 1947-52.* Premises where ice-cream is manufactured continued to be regularly visited by the inspectors. Several contraventions of the Regulations were discovered but these were mostly of a minor character and were satisfactorily dealt with after verbal cautions had been given. It was not necessary to take legal proceedings in any case.

*Frozen Lollipops.* The standard laid down for ice-cream does not apply to water ices, or iced-lollies. 43 samples of iced-lollies were taken for bacteriological examination and 2 samples failed to satisfy the coliform test. In both these instances visits were made to the local manufacturers concerned and advice was given by the Inspectors so as to secure better results.



*Food and Drugs Act, 1938—Sampling.* The number of samples examined was 2,833, of which 121 or 4·27 per cent, were found to be adulterated, compared with 163 or 5·5 per cent in 1954, when 2,944 samples were taken. Samples of milk taken in the City numbered 1,530, of which 40 or 2·61 per cent were not genuine. The percentage for 1954 was 4·8.

Other samples reported as unsatisfactory were:

Baked beans (1); biscuits (1); blanc mange powder (2); Blauds Pills (2); boric lint (1); bottled fruit (1); bread and butter (1); breakfast cereals (2); candied peel (3); canned fish (1); canned fruit (7); canned Irish stew (1); cod liver oil and malt extract (1); cough mixture (2); crab dressing (1); custard powder (1); dressed crab (1); flavourings (2); glace cherries (3); grape fruit squash (1); ground cinnamon (1); ground ginger (1); iced lollies (8); jam (3); lemon cheese (1); lemon curd (1); medicated lozenges (1); milk bread (1); oats (1); Parish's chemical food (6); piccalilli (1); pickled beetroot (1); pork sausage (6); seidlitz powder (1); shredded suet (1); soda mint tablets (1); soft drinks (1); solution hydrogen peroxide (3); sulphur tablets (1); table jelly (1); toffee apples (2); vitamin 'B' tablets (1); yeast tablets (1).

The following table summarises samples taken by the Department's Food and Drugs Inspectors and the subsequent action:

TABLE XVIII

Nature of Samples	No. of Samples	Genuine	Adulterated or otherwise Unsatisfactory	Letters of caution, etc.	Prosecutions
Beverages ....	98	96	2	2	—
Cereals ....	183	177	6	6	—
Confections ....	204	181	23	22	1
Drugs ....	251	230	21	21	—
Fats ....	35	35	—	—	—
Fish, Meats, etc. ....	182	171	11	11	—
Milk and Milk Products ....	1,588	1,548	40	39	1
Preserves ....	113	101	12	12	—
Seasonings ....	62	62	—	—	—
Vegetables ....	78	74	4	4	—
Miscellaneous ....	39	37	2	2	—
	2,833	2,712	121	119	2

In addition to the foregoing, the City Analyst, Mr. D. J. T. Bagnall, A.C.G.F.C. F.R.I.C., publishes in his Annual Report full details of the laboratory work done by him under the Food and Drugs Act.

*Legal Proceedings.* The following are the particulars of the legal proceedings concerning the 2 summonses referred to in Col. 5 of Table XVIII:—

Case No.	Act under which offence committed	Nature of offence	Result of Proceedings
628	Food and Drugs Act, 1938	Bread and Margarine sold as Bread and Butter	Fined £1.
1,227	Food and Drugs Act, 1938-50	Extraneous water in milk	Fined £1 10s.

*Byelaws with respect to the Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air.* The Byelaws, which came into operation on the 18th September, 1950, are administered jointly by the Chief Sanitary Inspector and the Chief Food Inspector. Although it was not necessary to institute proceedings against any person for offences, a number of cautions were given in respect of minor infringements mainly at refreshment rooms and food-preparing premises.

*Registration of Hawkers of Food and their Premises.* Section 61 of the Kingston upon Hull Corporation Act, 1952, gives power for registration by the Local Authority of all Food Hawkers and any premises used by hawkers for the storage of food. During the year 29 food hawkers were registered, including 21 vendors of ice-cream and 8 persons or firms who retail other food from vehicles or stalls.

*Public Health (Preservatives, etc. in Food) Regulations, 1925 to 1940.* 2,477 of the samples obtained under the provisions of the Food and Drugs Act, 1938 were also examined in the light of the above-mentioned Regulations and 59 were found to contain permissible preservatives. There were 3 contraventions of the Regulations, i.e., 2 samples of pork sausage and one soft drink were found to contain preservatives without declaration. The vendors of these samples were cautioned and subsequent samples were found to be satisfactory. 179 food substances were found to contain artificial colouring but in no instance was prohibited colouring found to have been used.

*Labelling of Margarine.* 14 samples of margarine were obtained from shops, and in these cases there were no contraventions of the labelling provisions.

*Food and Drugs Act, 1938, Section 34.* At the 31st December, 1955, there were 61 premises on the Local Authority's Register, namely, 58 wholesale dealers in margarine, one margarine factory and 2 butter factories.

*Inspection of Licensed Premises.* Public Houses are inspected frequently in the course of sampling under the Food and Drugs Act, enforcement of the Shops Acts, supervision of restaurants and refreshment places, etc.

118 licensed premises were inspected during the year and 35 contraventions of the Food and Drugs Act or Public Health Act were discovered. All these contraventions were readily dealt with by the owners or occupiers after receiving notice from the Department. In addition, 42 improvements were made by the Brewery Companies at the request of the Department, namely, improved facilities for washing of drinking glasses, 7; improved ventilation and drainage of cellars, 12; improved toilet facilities, 9; structural improvements, 14.

*Fertilisers and Feeding Stuffs.* Inspections and sampling under the Act are carried out by the Food and Drugs Inspectors, who may, at all reasonable times, enter any premises where such marked articles may be and may take samples either informally or in the prescribed manner. The Inspector can demand the production of the appropriate register and also any statutory statement received by a seller in respect of both First and Second Schedule articles which he has sold but which have not actually been on his premises or in his possession.

110 inspections were made, namely, 24 at retailers' premises, 61 at manufacturers' and 25 at merchants' premises. Several contraventions had taken place and the persons concerned were notified of the offences and cautioned by the Inspectors.

10 samples of feeding stuffs and 6 of fertilisers were obtained and submitted for analysis by the Agricultural Analyst. Of these samples 12 were taken at the request of other Authorities who had received adverse reports about samples taken in their areas. 3 of the samples of feeding stuffs and 2 of fertilisers were returned as satisfactory. The remaining 7 samples of feeding stuffs and 4 fertilisers were unsatisfactory because the limits of variation laid down in the Regulations were exceeded in one or more of their ingredients. The persons or firms concerned were notified of their failure to comply with the Act and/or Regulations.

*Pharmacy and Poisons Act, 1933.* Generally speaking a shopkeeper although he is not an "Authorised Seller" of poisons may become a "Listed Seller" of Part II poisons (i.e. any substance included in Part II of the Poisons List and not exempted by the Poisons Rules) provided his name and the address of his premises are entered in the list kept by the Local Authority. The usual types of poisons set out in Part II of the List are those connected with horticultural sprays, insecticides, seed and bulb dressings, phenols for general household use, rat poisons and hair

dyes. Poisons included in Part I of the Poisons List can only be sold by "Authorised Sellers" of poisons (pharmacists, etc.) and the Act requires the keeping of certain registers of stocks and sales for both types of persons.

During the year 19 persons applied in respect of 22 premises to have their names entered in the Corporation's list kept under the Act. The names of 19 persons, affecting 20 premises, were removed from the List as they had either ceased to sell poisons or the premises were closed. 189 persons applied for the retention of their names in the Corporation's list, in respect of 348 premises. All the applications were granted.

173 inspections were made for the purposes of the Act by the Authorised Officers. In 8 cases it was found that persons whose names were not in the Local Authority's List of Persons entitled to sell Poisons included in Part II of the Poisons List, were selling Phenolic poisons in contravention of the provisions of the Act. After being cautioned verbally by the Inspector in respect of these offences the vendors either discontinued the sale of such poisons or made application for the inclusion of their names in the Local Authority's List. It was also necessary to caution several persons whose names were included in the Local Authority's List for minor contraventions of the Act. All the persons took immediate steps to comply with the legal requirements.

## WORK OF THE FOOD DEPARTMENT

The following is a summary of the work carried out by the Chief Food Inspector and seven assistants.

*Scope of Work.* The duties of the Chief Food Inspector and his assistants include the inspection of the fish markets, the slaughterhouses, all meat, fish and fruit sold in the city, and of all retail shops (other than retail dairies) where food is sold. Milk shops and dairies are under the supervision of the Chief Sanitary Inspector's staff. The Chief Food Inspector's Branch is also responsible for the inspection of food for the Hull and Goole Port Health Authority. A further responsibility is the administration of the Performing Animals (Regulation) Act, 1925, and the Pet Animals Act, 1951.

The Chief Food Inspector and his staff also carried out the duties of Certifying Officers under the Ministry of Food Grading Scheme for the certification of pigs at two private slaughterhouses until the 23rd May, 1955, when Ministry of Food Graders took over the work.

*Slaughterhouses.* There are three public slaughterhouses in the City operated by the Corporation under the supervision of the Chief Food Inspector who is the Slaughterhouse Manager. In addition to the three public slaughterhouses there are three licensed private slaughterhouses and one for the private slaughter of pigs by cottagers, etc.

The following table shows the number of animals slaughtered in licensed slaughterhouses in 1955, and in previous years:

TABLE XIX

<i>Year</i>	<i>Cattle (and Calves)</i>	<i>Sheep</i>	<i>Pigs</i>	<i>Horses</i>	<i>Total</i>
1955	11,452	28,826	40,564	—	80,842
1954	15,512	34,333	36,008	—	85,853
1953	13,419	39,280	23,623	56	76,378
1952	14,235	34,909	19,587	304	69,035
1951	17,819	27,116	12,908	317	58,160
1938	16,910	51,111	31,551	—	99,572



*Slaughter of Animals Act, 1933.* There are now 79 persons licensed by this Authority to slaughter animals, including 3 Jews whose licences are subject to their obtaining the necessary licences and renewals thereof from the Rabbinical Commission to slaughter by the Jewish method for the food of Jews.

The Medical Officer of Health is authorised to issue licences to Mohammedans for the supply of meat to ships' crews, such licences being tenable for 24 hours to cover the period required.

*Public Health Meat Regulations, 1924.* Generally, these Regulations were well observed throughout the year, but cautions were given from time to time to those engaged in the handling and transport of meat.

The number of notifications received by the Chief Food Inspector involving the inspection of foodstuffs was 1,748.

All ante-mortem inspections at the Cattle Market are done by the Veterinary Officers of the Ministry of Agriculture and Fisheries. Details of the post-mortem inspections carried out by the Chief Food Inspector and his staff are as follows :—



TABLE XX

## SUMMARY OF CARCASSES INSPECTED AND CONDEMNED

	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed ....	7,811	2,569	1,072	28,826	40,564	—
Number inspected ....	10,009	3,312	1,461	34,017	44,843	—
<i>Affected with Diseases other than Tuberculosis—</i>						
Whole carcasses condemned	2	—	17	50	165	—
Carcasses of which some part or organ was condemned ...	1,322	471	4	637	6,328	—
Percentage of the number inspected affected with disease other than Tuber- culosis and cysticerci	13.23	14.22	1.44	2.02	14.48	—
<i>Affected with Tuberculosis only—</i>						
Whole carcasses condemned	21	52	1	—	33	—
Carcasses of which some part or organ was condemned ....	827	898	—	—	2,917	—
Percentage of the number inspected affected with Tuberculosis ....	8.47	28.69	.07	—	6.58	—
<i>Cysticercosis—</i>						
Carcasses of which some part or organ was condemned ...	34	9	—	—	—	—
Carcasses submitted to treat- ment by refrigeration ....	16	5	—	—	—	—

## WHOLE CARCASSES AFFECTED WITH TUBERCULOSIS

	1951	1952	1953	1954	1955
Cows ....	45	59	41	80	52
Heifers ....	9	8	11	14	10
Bulls ....	4	—	1	6	1
Oxen....	16	13	17	18	10
Pigs ....	29	36	30	31	33
Calves ....	3	3	2	1	1
	—	—	—	—	—
	106	119	102	150	107
	—	—	—	—	—

TABLE XXI

WHOLE CARCASSES FOUND TO BE UNSOUND FROM CAUSES OTHER THAN TUBERCULOSIS

BEEF		MUTTON		VEAL		PORK	
Disease or Condition	No.	Disease or Condition	No.	Disease or Condition	No.	Disease or Condition	No.
Septic		Moribund	6	Immaturity	4	Emaciation	6
Peritonitis	1	Emaciation	11	Pyrexia	4	Pyæmia	10
Pyrexia		Oedema	3	Moribund	1	Oedema	20
Emaciation	1	Pyæmia	1	Pyæmia	7	Pyrexia	15
		Abscess	1	Septic		Septicæmia	11
		Septicæmia	1	Pneumonia	1	Swine Fever	2
		Septic				Jaundice	9
		Pleurisy	3			Moribund	6
		Emaciation/ Oedema	17			Gangrenous	1
		Gaseous				Immaturity	1
		Lymphadenitis	1			Abnormal Odour	1
		Septic				Decomposition	2
		Pneumonia	3			Pyæmia/ Emaciation	2
		Pleurisy/ Emaciation	1			Swine Erysipelas	31
		Arthritis/ Emaciation	1			Emaciation/ Oedema	3
		Septic				Septic	
		Peritonitis	1			Pneumonia	18
						Extensive	
						Bruising	6
						Septic	
						Peritonitis	8
						Oedema/ Septicæmia	1
						Oedema/ Jaundice	1
						Enteritis/ Peritonitis	1
						Septic	
						Pleurisy	1
						Septic Metritis	1
						Pyrexia/ Emaciation	2
						Peritonitis/ Pleurisy	1
						Acute Enteritis/ Emaciation	2
						Suspected Swine Fever	3
Total	2	Total	50	Total	17	Total	165

*Unsound Food.* Condemned meat becomes the property of the Corporation and is sold to two firms in the City under contract.

*Fish:* condemned fish is sold to a fish manure manufacturing company whose premises adjoin the fish dock. An agreement was made between the trawler owners and a cat and dog food manufacturing company whereby a certain percentage of the fish landed daily is sold for processing into cat and dog food. This means that the total fish condemnations for the year were substantially reduced compared with previous years because in many instances fish, which would normally be declared unfit for human consumption went for manufacture into cat and dog food.

*Fruit and vegetables:* if in large quantities are taken to the refuse disposal tip and covered over.

*Tinned goods:* destroyed at the Corporation destructor.

The following is a summary of the unsound food surrendered or seized during the year :—

							<i>Tons</i>
Meat	...	...	...	...	...	...	225
Fish	...	...	...	...	...	...	381
Fruit and Vegetables			...	...	...	...	68
Tinned Goods		...	...	...	...	...	23
Miscellaneous Foodstuffs	...		...	...	...	...	4
Total			...	...	...	...	701

*Agreements for Destruction of Unsound Foodstuffs.* 14,623 agreements for the destruction of unsound foodstuffs were entered into by the owners and the Food Inspection Branch of the Health Department.

*Bacteriology.* In addition to the ordinary routine examinations, special microscopical preparations were made and examined from the blood and tissues of 4 animals for the detection of anthrax bacillus, all with negative results.

*Swine Fever.* 12 suspected cases of Swine Fever were reported to and later confirmed by the Ministry of Agriculture and Fisheries.

*Ministry of Food Grading Scheme.* At the two Certification Centres the Chief Food Inspector and his staff certified 3,770 pigs up to the 23rd May, 1955. Ministry of Food Graders took over the duties from that date.

*Food Preparing Premises.* Premises registered for the preparation of potted meat and other foods under Section 14 of the Food and Drugs Act, 1938, numbered 281 at the end of the year. 1,328 visits were made to premises by the Inspectors during the year.

Number of food premises in the area, by type of business :—

Grocers	1,420
Confectioners (Flour and Sugar)	1,183
Fish Game and Poultry Dealers	82
Fish Fryers	210
Fruiterers and Greengrocers	379
Cafes	145
Shellfish Dealers	3
Horse flesh Dealers (human consumption)	2
Butchers	282
Pork Butchers	42
	<hr/> 3,748 <hr/>

*School Meals Service.* 156 visits were made to school kitchens in the City for the purpose of food inspection and general cleanliness.

*Pet Animals Act, 1951.* 14 persons were registered, in respect of 17 Pet Shops, under the Pet Animals Act, 1951, during the past year. All premises were visited regularly.

*Fish Inspection.* The Food Inspection Branch has an office on the Fish Dock and 2 Inspectors devote most of their time to inspecting fish at the docks and in fish shops. The estimated weight of fish landed by 2,376 trawlers was 254,820 tons, of which 381 tons were found to be unsound, viz.:

TABLE XXII

<i>Fishing Grounds, etc.</i>	<i>No. of Trawlers</i>	<i>Estimated Weight of Fish Tons</i>	<i>Weight Unsound Tons</i>
North Sea ....	135	1,465	—
Iceland ....	712	70,860	145
Bear Isle ....	517	70,400	102
White Sea ....	559	69,795	46
Faroes ....	52	4,080	4
Norway Coast ....	168	21,640	49
Norway Herring ....	30	6,565	—
Greenland ....	19	2,815	6
Swedish Carrier ....	129	3,355	2
Swedish Herring ....	54	1,430	—
Danish Carrier ....	1	15	—
Miscellaneous ....	—	1,200	22
British Railways ....	—	1,200	5
<b>Totals ....</b>	<b>2,376</b>	<b>254,820</b>	<b>381</b>

*Butchers' Shops.* All butchers' and pork butchers' shops, and other shops where meat is sold, were visited from time to time throughout the year.

*Horse Meat.* Two shops which sell horseflesh for human consumption were visited regularly, and all carcasses inspected before being allowed to be sold.

*Fish and Game Shops, etc.* At the end of the year there were 210 fried fish, 82 fish and game, and 3 shellfish shops, and 47 fish-curing houses in the city. These premises were visited regularly by the Inspectors with a view to ensuring that the foodstuffs supplied were fresh and wholesome and that the premises and utensils were maintained in a clean condition.

*Restaurants and Cafes.* Regular visits were made throughout the year to the kitchens in which food is prepared and the improvement in the standard of hygiene continued.

#### SUMMARY OF INSPECTION OF PREMISES, ETC.

Slaughterhouses, Butchers' Shops, Factories and Stalls ....	6,460
Fish Shops and Stalls, Game Stores, Curing Houses and Carts ....	1,022
Fruit Warehouses, Shops, Markets, Stalls and Carts ....	1,534
<b>Total ....</b>	<b>9,016</b>

*Shellfish.* During the year 9 samples of mussels were submitted to the Bacteriologist who reported 6 samples as satisfactory and 3 samples as unsatisfactory.

*Educational Activity.* Lectures have been given to various gatherings during the year; one Inspector lectured weekly to student Sanitary Inspectors whilst another lectured to the Butchering Trade classes at the Technical College.

*Suspected Food Poisoning Cases.* 13 reports were received of suspected food poisoning during the year. Investigations were carried out in all cases and samples obtained, where possible, with negative results in all except 6 cases. Three of the more interesting outbreaks are quoted in the section of the report dealing with the control of infectious diseases.

*Legal Proceedings.* During 1955 legal proceedings were instituted in one case under the Food and Drugs Act, 1938, viz:

*Offence*

*Penalty*

Selling apples unfit for human consumption	....	....	£5 and £2 costs.
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## PART III

NATIONAL HEALTH SERVICE ACT, 1946

# NATIONAL HEALTH SERVICE ACT, 1946

## SECTION 21—HEALTH CENTRES

Negotiations were continued during the year between the Local Health Authority and the Kingston upon Hull Executive Council regarding the proposal to erect a comprehensive Health Centre on the Bilton Grange Estate. Plans and estimates were submitted to the Minister of Health who, in October, gave his approval in principle to the scheme. At the end of the year, the City Architect was completing working drawings, etc., with a view to inviting tenders for the work early in the new year.

Consideration was also given during the year to health service requirements on the Longhill and Great Field Estates. Both these are new housing estates in the course of completion, Longhill lying to the north of the Bilton Grange Estate, and Great Field to the south. As a long-term policy, the City Council agreed in principle to the erection of a Health Centre to serve an area inclusive of both the Great Field Estate and the East Hull Estate, the latter being one of the housing projects completed in the late 1920s.

So far as Longhill Estate was concerned, it was agreed that a Health Centre was not needed, the Estate being fairly close to the proposed Bilton Grange Health Centre and too small to require a Health Centre of its own.

With the gradual implementation of town planning proposals, the needs of the health services in relation to various neighbourhood units will have to be considered over the next few years. During 1955, discussions commenced regarding units 17 and 18 which lie to the west of the city centre between Anlaby Road and Hessle Road.

## SECTION 22 CARE OF MOTHERS AND YOUNG CHILDREN

*Ante-Natal Care.* Attendances at ante-natal sessions have been as follows:

TABLE XXIII

Ante-Natal Clinics	No. of Sessions	Attendances		
		First	Re-attendances	Total
<i>Sykes Street Clinic—</i>				
Monday and Thursday afternoons	101	1,104	3,582	4,686
Wednesday mornings	53	301	585	886
<i>East Hull Clinic—</i>				
Monday, Wednesday and Friday mornings	151	670	2,140	2,810
<i>North Hull Clinic—</i>				
Tuesday mornings	51	164	558	722
<i>West Hull Clinic—</i>				
Monday mornings, Tuesday and Wednesday afternoons	151	864	2,577	3,441
<i>Priory Road Clinic—</i>				
Tuesday mornings	51	129	505	634
<i>Marfleet Lane Clinic—</i>				
Thursday mornings	52	144	637	781
Total patients attending during the year			4,298	

A patient who comes to the ante-natal clinic has a full medical examination at her first visit, a specimen of her blood is taken for testing, she is advised to attend a mass radiography session for a chest X-ray, and if necessary arrangements are made for dental treatment. She may apply at the clinic for admission to hospital for her confinement on social grounds, and, if accepted, will subsequently attend the hospital ante-natal clinic.

If, however, she desires to have her baby at home, she is encouraged to book her own doctor, who if he wishes can see her throughout her pregnancy, and will not be expected to treat her in an emergency without any knowledge of her previous condition. The results of the blood tests are sent to the patient's own doctor whether he has been booked or not.

It is at the clinic too that the patient first meets the domiciliary midwife who is going to attend her. She has further opportunity of getting to know her both

during future clinic visits and when the midwife visits her in her own home to discuss preparations for the confinement.

*Blood Tests.* In addition to the routine testing for blood grouping, Wasserman and Kahn reactions and Rhesus grouping, a screening test was introduced during the latter part of the year to ascertain whether the hæmoglobin level was above or below 70%. The results have been as follows:—

<i>Hæmoglobin %</i>	<i>Number of patients examined</i>	<i>Percentage of total number of estimations</i>
Over 70% ... ..	517	52%
At 70% ... ..	100	10%
Under 70% ... ..	375	38%

In view of the high proportion of patients suffering from anæmia, ferrous sulphate or ferrous gluconate tablets are now issued to every ante-natal patient, and if the initial test has shown that she is anæmic, it is repeated later in her pregnancy.

*Mass Radiography.* 1,041 ante-natal patients were examined by the mass radiography unit during the year. Many more promised to attend but failed to keep their appointments.

*Post-natal Care.* Attendances for post-natal examination have remained low, as patients who have booked their own doctor return to him for their post-natal examination. A special post-natal session has been introduced at Sykes Street Clinic, but patients have not attended very well.

*Birth Control Clinic.* The birth control clinic is now available for any mother without an appointment, and this has resulted in an increase in numbers as is shown in the following table.

	<i>New Cases</i>	<i>Total attendances</i>
1953 ... ..	59	408
1954 ... ..	99	515
1955 ... ..	181	832

It is essential that patients should attend for checking every six months after their first visit, and if they do not do so, the health visitor gives them a reminder.

*Care of unmarried mothers.* All unmarried mothers are referred to the Sister-in-Charge of the Sheltering Home for Girls, who sees them and makes arrangements for the confinement. If the girl's own home is unsuitable, she is usually admitted to

the York Diocesan Maternity Hostel for two months before the baby is born and remains there for two months afterwards, going into hospital for the actual confinement.

In the case of an unmarried mother having her second baby, or in other special circumstances, arrangements are made for the girl to be accommodated outside of Hull.

During the year 106 girls were referred to the Sheltering Home for Girls, 24 were admitted to the Maternity Hostel, and 3 to hostels outside of Hull.

#### NOTIFICATION OF INFECTIOUS DISEASES ASSOCIATED WITH MATERNITY CASES

*Puerperal Pyrexia.* 117 cases of puerperal pyrexia were notified during the year—79 in hospital and 38 in domiciliary confinements. This is an increase of 38 over the previous year's figure, but is largely due to increased notification both in hospital and domiciliary cases rather than an increased incidence of infection. None of the domiciliary cases were seriously ill, and with antibiotic treatment the infection cleared up quickly.

*Ophthalmia neonatorum.* 4 cases were notified during the year, but in no case was there any serious infection of the eyes or impairment of vision.

*Pemphigus neonatorum.* 3 cases were notified during the year, all following home confinements. No baby was seriously affected or had to be removed to hospital, and in each case only one or two spots were present.

*Maternal Mortality.* There were 6 maternal deaths during the year; 3 other deaths were primarily due to another disease, pregnancy being a secondary complication.

*Live Births.* There were 5,413 live births in the city, of which 5,107 were legitimate and 306 illegitimate, giving a birth rate of 18.67 per 1,000 population.

*Stillbirths.* There were 139 stillbirths during the year, giving a stillbirth rate of 25.04 per thousand live and stillbirths. 92 of the stillbirths occurred in hospital confinements and 47 in home confinements, the difference being due to the fact that those cases with complications, who are more liable to have a stillbirth, are admitted to hospital.

*Infant Mortality.* There were 143 deaths of infants under 1 year of age, giving an infant mortality rate of 26.42 per 1,000 live births. Of these deaths, 85 occurred during the first month of life, giving a neo-natal mortality rate of 15.7 per 1,000 live births.



TABLE XXIV

## INFANTILE AND NEO-NATAL MORTALITY

Year	Deaths under 1 month		Deaths under 1 year	
	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births
1951	135	23.9	258	46.0
1952	120	21.6	221	39.8
1953	124	21.7	201	35.2
1954	106	19.3	186	33.9
1955	85	15.7	143	26.4

Pneumonia was the commonest cause of death, particularly between the ages of 1-6 months, and prematurity was the largest single cause of death under 1 month. Details of the causes of death are shown in Table V, page 23.

*Premature Babies.* 419 premature babies were born alive during the year, 236 being born in hospital, 158 at home, and 25 in nursing homes. 367 of these babies were surviving at the end of 28 days.

31 babies from home confinements and 2 from nursing home confinements were transferred either to the special premature baby unit at the Maternity Hospital or to the cubicle ward of the Western General Hospital. The premature baby-carrying cot, which is heated and thermostatically controlled at 90°, was used in the ambulance to minimise the danger of moving the baby.

Those babies who were fit to be kept at home were nursed by a midwife who has been specially trained in the care of premature babies. Special equipment for the baby is loaned by the Health Department and the midwife attends for general nursing and superintending the feeds as often as she thinks is necessary. The results of this scheme show that of 127 premature babies who were nursed at home, 121 survived more than 28 days.

In order to have more of the nursing staff fully trained in the care of premature babies, arrangements have been made in conjunction with the Hull (A) Group Hospital Management Committee for a health visitor or a midwife to go into the Premature Baby Unit for a period of 3 weeks at a time and take part in the work there. The scheme started in October and has worked very satisfactorily.

**TABLE XXV**  
ANALYSIS OF LIVE PREMATURE BIRTHS

WEIGHT AT BIRTH	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to Hospital			Born in Nursing Home and nursed entirely there			Born in Nursing Home and transferred to Hospital		
	Total	Died in first 24 hours	Survived 28 days	Total	Died in first 24 hours	Survived 28 days	Total	Died in first 24 hours	Survived 28 days	Total	Died in first 24 hours	Survived 28 days	Total	Died in first 24 hours	Survived 28 days
3lb. 4oz. or less (1,500 gms. or less)	26	12	7	—	—	—	3	2	—	—	—	—	1	—	—
Over 3lb. 4oz. up to and including 4lb. 6oz. (1,500—2,000 gms.)	44	1	36	9	1	7	13	—	10	3	—	3	1	—	1
Over 4lb. 6oz. up to and including 4lb. 15oz. (2,000—2,250 gms.)	67	1	62	17	—	15	6	1	3	8	1	7	—	—	—
Over 4lb. 15oz. up to and including 5lb. 8oz. (2,250—2,500 gms.)	99	—	98	101	—	99	9	2	7	12	—	12	—	—	—
TOTALS	236	14	203	127	1	121	31	5	20	23	1	22	2	—	1

*Child Welfare Clinics.* The 17 child welfare centres in use last year have remained open, and an additional centre at Longhill County Primary School has been opened on Saturday mornings. This is not an ideal time for a clinic, but there is need for a centre in this rapidly-growing housing estate. The school is the only suitable building in which such a clinic could be held and the Education Committee have given permission for its use when no classes are being held. In spite of the difficulty some mothers have in attending a clinic on a Saturday morning, it is becoming established and is fulfilling a need.

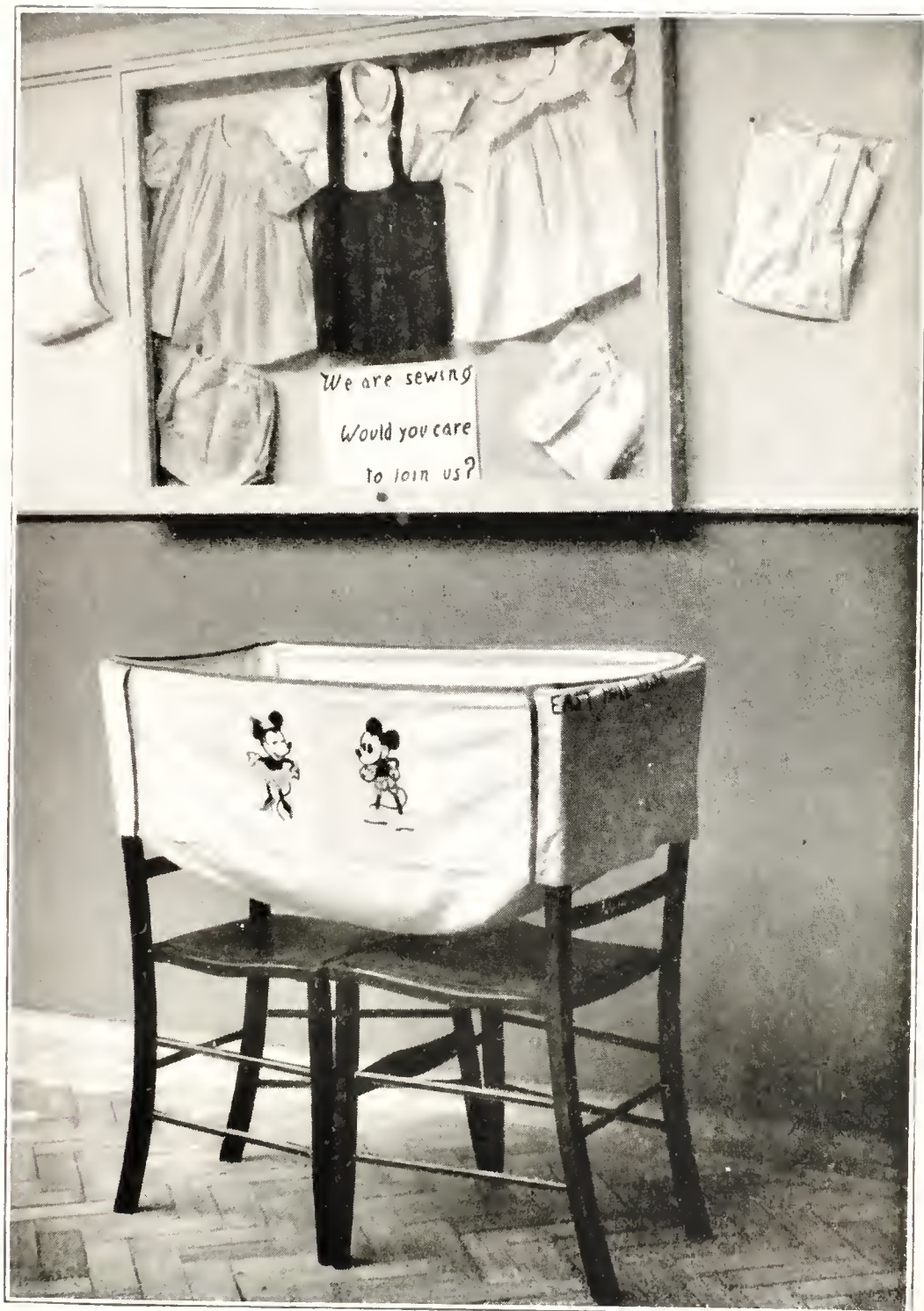
	1955	1954
Number of Centres provided	18	17
Number of Sessions during the year	1,334	1,304
Number of children first attended under 1 year of age	3,217	3,233
Total number of children who attended during the year...	6,280	6,428
Total attendances during the year ..	41,2.4	38,211
Cases seen by medical officers	14,303	10,301
Cases referred for Hospital Treatment	222	203

There has been a slight fall in the number of children attending the clinics this year, but these children have attended more frequently than during the previous year. The drop in numbers is in the 2-5 years age group, when mothers easily fall out of the habit of attending the clinic. Plans are being made to make the clinics more attractive with posters, exhibitions and educational films, and to start regular birthday examinations so that this group of children will continue to have regular supervision during the pre-school period.

There are four ultra-violet light clinics and a physio-therapy clinic to which children from the Child Welfare Clinics are referred.

*Voluntary workers at clinics.* Among the means of making the clinic more attractive to the mothers, not the least is the cup of tea and biscuit. In several clinics this arrangement has been re-instituted with the help of voluntary workers, and their assistance is greatly appreciated.

*Welfare Foods and Nutritives.* The distribution and sale of welfare foods has continued from the Central Depot at Witham and from each of the Maternity and Child Welfare Centres. Certain nutritives have also been sold on the recommendation of the medical officer in charge of the clinic.



"THE STORK CLUB" EXHIBITION OF SEWING WORK AT THE EAST HULL CLINIC





THE PREMATURE BABY NURSE ANSWERS A CALL

The distribution has been as follows:—

Article	Witham	Maternity & Child Welfare Clinics
<i>Welfare Foods</i>		
"National" Dried Milk (tins)	80,859	139,118
Cod Liver Oil (6oz. bottles)	10,076	29,335
Orange Juice (6oz. bottles)	58,263	149,503
A and D Capsules (pkts. of 45)	4,665	11,841
<i>Nutritives</i>		
Virol (8oz. bottles) ....	—	3,227
Malt Extract (1lb. jars) ...	—	58
Malt and Iron (4oz. bottles) ...	—	2,155
Cod Liver Oil Emulsion (8oz. bottles) ....	—	1,080
Virolax ....	—	47

*Home Safety.* Particular attention has been paid towards education in precautions to ensure home safety. Talks have been given to the mothers both in their homes and in the clinics, posters have been displayed and a film shown in each clinic. During the year 12 children under the age of 5 years have lost their lives either in or about the home, of which 3 have been due to burns or scalds.

*Fireguards.* Fireguards are supplied through the Health Department at cost price, or free in necessitous cases, to try to reduce the risk of burning both to the very young and the very old. These are now available in 4 sizes, 2 more sizes having been added during the year to give protection from free standing stoves and from the special fireplaces in prefabricated houses.

*Nurseries and Child-Minders Regulation Act, 1948.* There were two registrations during the year, one of premises and one of a daily minder.

*Day Nursery.* Pearson Park Nursery has been the only day nursery in use during the year. The Nursery at 449 Holderness Road has remained closed, and the numbers on the waiting list have never been large enough to justify re-opening it.

Pearson Park Nursery has accommodation for 48 children—10 under 1 year, 12 aged 1-2 years, and 26 aged 2-3 years. Children are either brought to the nursery by relatives or are picked up from collecting points at Villa Place or Buckingham Street Nursery Schools and taken to the day nursery by the ambulance service.



## Reasons for admission of children:—

	<i>Children in Nursery Jan., 1955</i>	<i>Children admitted during 1955</i>	<i>Children in Nursery Dec., 1955</i>
1. Parents separated or divorced . . .	22	31	17
2. Child illegitimate . . .	13	18	9
3. Mother widowed . . .	4	6	4
4. Illness of one of parents . . .	1	7	—
5. Mother's confinement	1	8	1
6. Financial or housing difficulties . . .	—	7	3
7. Non-priority cases . .	9	37	19

Although the Nursery has accommodation for 48 children only, more than this number are kept on the register so as to allow for absentees. The average number of children in daily attendance during the year was 33—16 under 2 years and 19 over 2 years.

*Nursery Students.* 12 Nursery Nurses are trained each year in conjunction with the Education Department. The course lasts 2 years, one year being spent in the day nursery and one year in a nursery school, but students attend school for 2 days each week for further education. Six first year and six second year students were working at the Day Nursery at the beginning of the year, residential accommodation being provided for some of them. 11 of the second-year students took the National Nursery Nurses Examination, 9 being successful. Some of these girls have obtained posts in nurseries, while others have entered hospital for general training.

*Grants to Local Voluntary Associations.* A grant was given by the Corporation of £1,300 to the York Diocesan Maternity Hostel, £150 to the Sheltering Home for Girls, and £75 to the Hull Braves Guild.

*Prevention of Break-up of Families.* (Circular 27/54). Families tend to break up during periods of stress such as during the illness of the mother or when the father becomes disabled or loses his employment. If the appropriate social services can be brought to the family to support them at this time, the break-up may be prevented. Then not only does the mental health of the children benefit, but the financial resources of the local authority are spared, owing to the high cost of providing residential accommodation of any kind.

The Health Visitors are becoming increasingly aware of the needs of such families and are bringing the cases up for consideration. Many can be dealt with within the Health Department itself, by sending a Home Help or a sitter-up to give assistance in the home. Other cases require help from outside agencies such as the National Assistance Board, the City Treasurer's Housing Section, the Welfare Services, or the Children's Departments, and these cases are the ones brought up for discussion at the Co-ordinating Committee. This Committee has had irregular meetings during this year, but it is hoped that they will soon become more regular and more frequent.

The Home Help Service is able to provide a substitute for the mother in the event of her sudden removal on account of illness or any other cause, but members of the Service are not yet sufficiently trained to be able to tackle the problem family. However, a training course for Home Helps has been planned, which will aim to give members some insight into the difficulties of such homes. They will then be able to go and work alongside the mother of such a family, and by teaching and example help her to cope with her difficulties.

## **PROVISION OF DENTAL TREATMENT**

During the year the Authority has continued to provide dental treatment for those taking advantage of the Maternity and Child Welfare Scheme. As the figures will show, for a city of Kingston upon Hull's proportions, this has been of a very limited nature as the staffing situation continues to be very critical. Owing to the departure to the South of England of Mrs. Gibson, we lost the services of one of our part-time Dental Officers. This, together with the reduction in the number of sessions undertaken by two other Dental Officers, has depleted our effective strength to the equivalent of a little under three and a half full-time Dental Officers. The work undertaken for the Maternity and Child Welfare Service by the Authority's Dental Officers has been approximately one-tenth of the whole, the remainder of the time being occupied with the school children.

In order to increase the facilities provided by the Dental Services, it has been decided to commence evening sessions for maternity cases during the coming year, and it is hoped that this will result in an increase in the amount of work undertaken.

It will be noted, on reference to the statistical information, that although there is a reduction in the amount of work done, there has been an increase in the number of general anaesthetics administered. There has been an attempt to provide an improved anaesthetic service by instituting at least one weekly general anaesthetic session in each clinic. The new anaesthetic machines provided last year have been a

great help, and the Principal School Dental Officer, and three of the Authority's Medical Officers have attended a week's refresher course in dental anæsthetics held at the Eastman Dental Hospital, London.

TABLE XXVI

## (A) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	.... 302	302	356*	146
Children under five ....	.... 316	299	318*	286

\* Includes cases under treatment and carried forward from 1954.

## (B) FORMS OF DENTAL TREATMENT PROVIDED

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anæsthetics	Dentures Provided		Radio-graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers ...	137	141	—	—	1,447	135	127	52	27
Children under five	—	7	3	—	575	154	—	—	—

Total attendances during the year :—

Expectant and Nursing Mothers, 1,104 ; Children, 485.

## SECTION 23—MIDWIFERY

During the year 96 midwives notified their intention to practise, of whom 57 were domiciliary midwives employed by the Local Health Authority, 30 were employed in hospitals and maternity homes and 8 practised as independent domiciliary midwives and 1 as an independent maternity nurse.

The midwives employed by the Local Authority attended 2,660 cases during the year as follows:

(a) (i) When a doctor was not booked but was present at the time of delivery	34
(ii) When a doctor was not booked and was not present at the time of delivery	574
(b) (i) When a doctor was booked and was present at the time of delivery	1,246
(ii) When a doctor was booked and was not present at the time of delivery	806
Total	<u>2,660</u>

Thus the majority of women having home confinements are now booking their own doctors, though many of them continue to attend the ante-natal clinics for supervision.

Medical aid was called in 585 cases. In 449 cases medical attention was required for the mother and in 136 for the infant.

*Analgesia.* 6 trilene inhalers of the approved type were purchased during the year and have been used in 253 cases. The apparatus has only been available for part of the year, but it has proved very popular with the patients and it seems likely that as more trilene inhalers are obtained the gas and air apparatus will tend to fall into disuse.

The following is an analysis of the analgesics used by the midwives employed by the Local Health Authority.

	<i>Given when acting as a midwife</i>	<i>Given when acting as a maternity nurse</i>
Gas and Air	892	925
Trilene	103	150
Pethidine	455	775

*Infant Deaths.* There were 7 infant deaths and 41 still births when a domiciliary midwife was in attendance.

*Emergency Obstetrical Unit.* This service is staffed by the midwives at the Midwifery Training School. 45 emergency calls were received during the year, and 44 pints of blood and 14 pints of plasmosan were used in treating the cases.

All cases responded to treatment, six being transferred to the Maternity Hospital later.

*Midwifery Training School.* During the year 20 pupil midwives received their Part II training at the centre and entered for the State examination, all of whom were successful, and 13 of whom are now practising midwifery. In addition 6 pupils were accepted for district training for a period of 3 months from Fulford Maternity Hospital, York.

*Refresher Courses for Midwives.* One supervisor and 6 midwives have attended refresher courses this year.

*Staff Changes.* Six midwives resigned during the year; 3 transferred to hospital service, 1 to take a Premature Baby Training Course, 1 on account of ill health and 1 resigned upon marriage.

## SECTION 24—HEALTH VISITING

The Health Visiting Staff has been further depleted during the year, 9 members having left, 1 due to retirement, 2 to emigration—South Africa and Canada, 1 for domestic reasons, and 5 to take posts with other Authorities.

Once again the visits to the aged and chronic sick have increased and now take up a considerable part of the Health Visitors' time, whilst in addition problem and near problem families have needed frequent visiting. Monthly visiting of all children under 1 year of age has again been aimed at and has no doubt helped in the reduction of the infant mortality rate.

The close liaison between the Maternity Hospital and Health Visiting Service has been further strengthened. Since June one Health Visitor has acted as Liaison Officer, attending the hospital's three ante-natal clinics and visiting the hospital weekly. During the year she made 18 hospital visits and 37 attendances at clinics,

dealing with 79 problems, most of them involving the care of children during the mother's stay in hospital, or treatment in bed at home for the mother before admission to hospital.

Requests have been made for visits to the chronic sick by the Geriatric Consultant to assess the social conditions of cases before admission to the geriatric wards, and 800 follow-up visits have been paid at the request of the hospital Almoner.

Lectures were given on Social and Preventive Medicine to the Senior Student Nurses, Western General Hospital, and the nurses then accompanied the Health Visitors and District Nurses on visits to homes and clinics.

*Training of Health Visitors.* Four students completed the course of training, three being successful in obtaining the Health Visitors Certificate. Two students who commenced the new course in September were previously employed as Clinic Nurses for a few weeks.

#### VISITS PAID BY HEALTH VISITORS

Total domiciliary visits	139,129
Total visits to Children	127,122
Visits to Expectant Mothers—	
First Visits	829
Re-visits	567
Infants under 1 year—	
First Visits	5,690
Special and Re-visits	40,786
Infants aged 1–5 years—	
First Visits	366
Special and Re-visits	80,280
Aged and Chronic Sick Visits	2,073
<i>Miscellaneous Visits</i>	
Infection, Removal, Medical Aid, Follow-up of Hospital Discharges, etc.	8,537

Staff at the end of the year:

30 Health Visitors

9 Student Health Visitors

2 Tuberculosis Health Visitors with Health Visitors Certificate

3 Tuberculosis Health Visitors without Health Visitors Certificate

1 Clinic Nurse



## SECTION 25—HOME NURSING

*Home Nursing Service.* This service continued to function from the Nursing and Midwifery Centre, Park Street. The number of patients nursed increased slightly compared with the previous year.

The number of new cases totalled 6,725 whilst patients already on the books from the previous year numbered 1,060, necessitating 197,426 visits.

## Classification of cases:

Surgical	....	....	....	....	2,342
Medical	....	....	....	....	4,735
Diabetics	....	....	....	....	247
T.B.	....	....	....	....	234
Maternity complications	....	....	....	....	198
Infectious diseases	....	....	....	....	29
					<hr/>
					7,785
					<hr/>

The figures in the following analysis are included in the above:—

Number of patients over 65	....	....	1,253
„ „ under 5	....	....	387
Patients requiring injections	....	....	4,470
„ „ over 24 visits	....	....	825

Up to the end of September a Children's Trained Nurse was employed for the nursing of sick children, but there were not enough child patients to work the scheme effectively. Two nurses are on late duty at the Centre each night for emergency visits and for morphia injections.

Fourteen nurses left the service during the year and ten new nurses commenced duty, including one S.R.N. male nurse and one S.E.A.N. male nurse. Three additional Douglas Vespa Motor-cycles were provided for the use of the male nurses, bringing the total to four machines. The remainder of the staff use their own bicycles or mechanised machines. The Acting Superintendent has the use of a car.

The staff at the end of the year was as follows:

- 1 Acting Superintendent
- 1 Acting Deputy Superintendent
- 30 Full-time State Registered Nurses (13 District Trained)
- 5 Full-time State Registered Nurses Male (1 District Trained)
- 1 Full-time State Enrolled Assistant Nurse Male
- 1 Full-time State Enrolled Assistant Nurse Female
- 4 Part-time State Registered Nurses (1 District Trained)
- 1 Part-time State Enrolled Assistant Nurse

(30 hours per week worked by part time staff)

*Sitters-up Service.* This service was expanded during the year and served a very useful purpose. Requests for the service were made by the General Practitioners, Welfare Officers, Health Visitors and the District Nurses attending patients. Day time service was given in necessitous cases as well as 4 or 5 nights per week.

Number of Sitters-up employed on a casual basis	51
Number of cases attended	475
Number of visits paid	10,550

## SECTION 26—VACCINATION AND IMMUNISATION

Vaccination against Smallpox and Immunisation against Diphtheria and Whooping Cough are both available through those private doctors who have agreed to give such service and through various clinics of the Health Department. At the end of the year 131 medical practitioners were co-operating to vaccinate and immunise in accordance with the provisions of the National Health Service Act, 1946.

Throughout the year special vaccination and immunisation sessions were held at three main clinics. Vaccination and immunisation continued to be available also at the Maternity and Child Welfare Clinics in conjunction with infant welfare; commencing on the 8th October facilities also became available at premises in the Longhill County Primary School each Saturday morning.

Vaccination in early infancy is recommended by each Health Visitor when she makes her routine visit to a mother after the birth of a child.

*Vaccination.* During 1955, 1,993 infants were successfully vaccinated before reaching 1 year of age—989 were vaccinated by private medical practitioners and 1,004 at Health Department Clinics. This compares with 2,085 (998 by private medical practitioners and 1,087 at Health Department Clinics) vaccinated in the previous year.

The following summary shows the numbers of successful vaccinations and re vaccinations carried out during 1955 :—

TABLE XXVII

Age at date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	TOTAL
Number Vaccinated	1,993	54	55	45	113	2,260
Number re-vaccinated	—	2	7	26	152	187

The age in months of those under 1 year at the time of vaccination is shown below :—

TABLE XXVIII

**Successful primary vaccination of infants under 1 year**

Age in months when vaccinated													
	0	1	2	3	4	5	6	7	8	9	10	11	Total
Clinics	—	39	183	341	203	96	52	34	20	21	10	5	1,004
Private Doctors	8	180	190	248	147	89	45	39	19	13	4	7	989
Total	8	219	373	589	350	185	97	73	39	34	14	12	1,993

25 infants who failed to show any reaction after a first vaccination were not brought by the parents for a second attempt, and 104 infants did not show any reaction after a second vaccination.

Details of successful primary vaccinations recorded each year during the last five years are given below:

TABLE XXIX

Year	Age when vaccinated					Total
	Under 1 year	1 year	2 to 4 years	5 to 14 years	15 years and over	
1951	2,230	51	35	59	163	2,538
1952	2,021	29	39	46	148	2,283
1953	1,806	20	27	50	149	2,052
1954	2,085	27	30	33	133	2,308
1955	1,993	54	55	45	113	2,260

The following table shows the percentage of infants who were vaccinated by the end of the year following that in which they were born:

<i>Year of Birth.</i>	<i>Percentage Vaccinated at 31st December of following year.</i>
1950	38.28
1951	35.72
1952	32.48
1953	36.55
1954	37.00

In an experiment to induce parents to have their children vaccinated, the mobile unit toured certain streets in one of the thickly populated areas of the City on three afternoons during May and June. The ground was prepared beforehand by the Health Visitors and also by the exhibition of posters in shop windows in the area but the response was most disappointing, only 15 vaccinations being done during the whole period.

It was not felt justified in continuing the experiment any longer, the present low rate of infant vaccination seeming to indicate a general apathy on the part of parents.

*Diphtheria Immunisation.* In addition to the facilities for immunisation provided at the Health Department clinics, the mobile unit continued to tour the streets and visit schools. There is no doubt that by the use of this unit a number of children who would not otherwise have been immunised were given this protection. Medical Practitioners who co-operated under the provisions of the National Health Service Act, 1946, were responsible for 1,217 initial immunisations and gave 348 re-inforcing injections. Health Visitors and School Nurses continued to visit and advise parents to have their children immunised and the School Nurses obtained consent for children to be immunised during school hours. Propaganda was continued by the use of posters, leaflets and "first birthday cards", and by talks to local organisations by medical and other staff of the Health Department.

The immunised child population in the City at 31st December, 1955, was:—

<i>Age Group.</i>	<i>Total Immunised.</i>	<i>Percentage Immunised.</i>
Under 1 year ....	622	
1-2 years ....	3,009	
2-3 years ...	3,458	
3-4 years ...	3,640	
4-5 years ....	3,980	
	— 14,709	55.3
5-10 years ....	25,744	
10-15 years ....	18,165	
	— 43,909	86.4

Out of the total number of children under 15 years of age, estimated at 77,400 75.7 per cent. (58,618) had been immunised against diphtheria at the end of the year.

*Vaccines.* Prior to 1955 the agent for Diphtheria Immunisation had been A.P.T. in children under 10 years of age, and T.A.F. had also been used exclusively as a reinforcing dose. However, on a request from the Central Public Health Laboratory, P.T.A.P. was brought into use in June for children under 10 years of age. During the succeeding two or three weeks several cases of reaction were brought to the notice of the Department and, after further consultation with the Central Public Health Laboratory it was decided to discontinue the use of P.T.A.P. in children over six years of age. No further reactions were reported in children receiving P.T.A.P. and since that time, 197 completed primary immunisations and 2,783 reinforcing doses have been given with this agent.

Of the total of 5,609 primary immunisations during the year, 79 per cent. (4,430) had been immunised with the combined vaccine giving protection against both Diphtheria and Whooping Cough.

TABLE XXX

## DIPHTHERIA IMMUNISATION IN 1955

Immunised by Local Health Authority :	Schick Test				Immu- nised after Test	Immunised without test			Immunisation not completed at 31st December			Schick Re-Test			Second Immu- nisation	Second Immu- nisation not completed at 31st December	Reinforcing Injection	
	No.	Neg.	Pos.	N/K		Diph- theria Antigen	Com- bined Antigen	Total	Diph- theria Antigen	Com- bined Antigen	No.	Neg.	Pos.	N K			Diph- theria Antigen	Com- bined Antigen
Adults (15 years and over)	17	10	7	—	—	—	—	7	—	—	56	43	13	—	13	1	—	1
Schoolchildren (5 to 15 years)	1	—	1	—	687	37	724	172	49	—	—	—	—	—	—	8,186	496	8,682
Children (under 5 years)	—	—	—	—	282	3,368	3,650	70	1,176	—	—	—	—	—	—	65	12	77
Immunised by Private Doctors	58	40	18	—	192	1,025	1,217	1	15	2	2	—	—	—	—	226	122	348
TOTAL	76	50	26	—	1,161	4,430	5,591	250	1,240	58	45	13	—	13	8,478	630	9,108	



TABLE XXXI.

IMMUNISATION AGAINST WHOOPING COUGH, 1955

	<i>Immunised.</i>	<i>Incomplete at 31st December.</i>	<i>Reinforcing Injection.</i>
Immunised by Local Health Authority:			
Adults (15 years and over) ....	—	—	—
School Children (5-15 years) ....	43	13	—
Children (under 5 years) ....	215	66	—
Immunised by Private Doctors ....	10	—	—
Total .....	268	79	—

Vaccination against Smallpox and Immunisation against Diphtheria and Whooping Cough are available at the following clinics free of charge:

St. Martin's Church, North Road ....	Each Monday at 2.0 p.m.
St. Philip's Church, Amethyst Road ..	Each Monday and Wednesday at 2.0 p.m.
Church of the Ascension, Priory Road ....	Each Monday and Friday at 2.0 p.m.
North Hull Clinic, Ellerburn Avenue ....	First and third Monday in each month at 2.0 p.m.
East Hull Clinic, Morrill Street . ....	Each Tuesday at 2.0 p.m.
Methodist Church Hall, Preston Road ....	Each Tuesday at 2.0 p.m.
Mission Hall, Carlton Street ....	Each Tuesday at 2.0 p.m.
Methodist Church Hall, Potterill Lane, Sutton ...	Alternate Tuesdays at 2.0 p.m.
Froghall Lane Clinic ....	Alternate Tuesdays at 2.0 p.m.
St. Nicholas Church, Pickering Road ....	Each Wednesday at 2.0 p.m.
Newland Methodist Church, Newland Avenue ...	Each Wednesday and Friday at 2.0 p.m.
West Hull Clinic, 69 Coltman Street ....	Each Thursday at 2.0 p.m.
King's Hall, Fountain Road . ....	Each Thursday at 2.0 p.m.
St. Michael's Church, Holderness Road ....	Each Thursday at 2.0 p.m.
Church of the Transfiguration, Albert Avenue .	Each Friday at 2.0 p.m.
Sykes Street Clinic ....	Each Friday at 2.0 p.m.
St. Ninian's Church, Chanterlands Avenue ....	Each Friday at 2.0 p.m.
Longhill ....	Each Saturday at 9.30 a.m.

## SECTION 27 AMBULANCE SERVICES

As was expected from indications in previous years, the year 1955 has again seen an increase in the mileage covered and the number of patients carried by the ambulance service. Thus 1955 has been the busiest year since the inception of the service in 1948, and it would appear from present trends that demands on the service have still not yet reached their peak.

In 1955 the ambulance service transported over 84,000 patients, an increase of over 53% since 1952, although the staff of the service has remained constant since that time. The total aggregate mileage for 1955 was 542,553, which represented an increase of 5½% over the previous year. However, the average number of miles per patient has fallen to 4·8, the lowest figure so far recorded.

The trends in mileage and number of patients carried are shown on the accompanying graphs.

Of the total mileage 76% was on ambulance service work, the balance being made up of departmental work, disinfection, mental health, etc.

The relationship of the service with the hospitals, general practitioners, patients, East Riding County Council ambulance service and the local British Railway authorities has remained good, to the mutual advantage of all.

## AMBULANCE SERVICE STATISTICS

	Patients	Mileage
Ambulance Cases	35,401	213,069
Sitting Cases	48,721	195,273
Totals	84,122 = 12·4% inc. over 1954	408,342 = 5·4% inc. over 1954

Analysis of the above statistics shows that approximately 80% of the work represents traffic with the Hull Royal Infirmary and the Kingston General Hospital, the former being responsible for 47% and the latter for 33% respectively.

63% of the above work has been in respect of the transport of patients to and from the various out-patients clinics, particularly those of the Hull Royal Infirmary and the Kingston General Hospital. By far the largest single item has been the transportation of patients attending for remedial exercises and physio-therapy treatment at the hospitals.

Approximately 5% only of transport requests emanate from general practitioners.

*Long Distance Transfers.* In addition to the road mileage the service has arranged for the transfer of 20 other patients by rail for journeys covering a total of 2,325 miles. All journeys were carried out smoothly and satisfactorily.

*Emergency Calls.* Requests for the service of ambulances as a direct result of "99" calls to the police have been more numerous than in 1954. 3,982 persons involved in local accidents or other emergency incidents were transported during the year, together with another 47 cases who were carried on behalf of the East Riding County Council, involving an inclusive mileage for the ambulance service of 18,632.

The average time from receipt of call to arrival at the scene of an accident has remained consistently good, being about 4½ minutes in spite of local problems of railway level crossings and river bridges. Fortunately no outstanding or major accident has arisen during the year. Calls have been received for a variety of reasons including industrial, docks, shipping, domestic and road accident cases. On one occasion, on being summoned to the site where a child had disappeared in one of the local drains, the ambulance driver removed his clothing and went into the water in an effort to save the child. Unfortunately he was unsuccessful.

*Midwifery Car Service.* The total mileage involved in this work for 1955 shows a substantial reduction of about 5,000 miles on that for the previous year, being 34,937 miles.

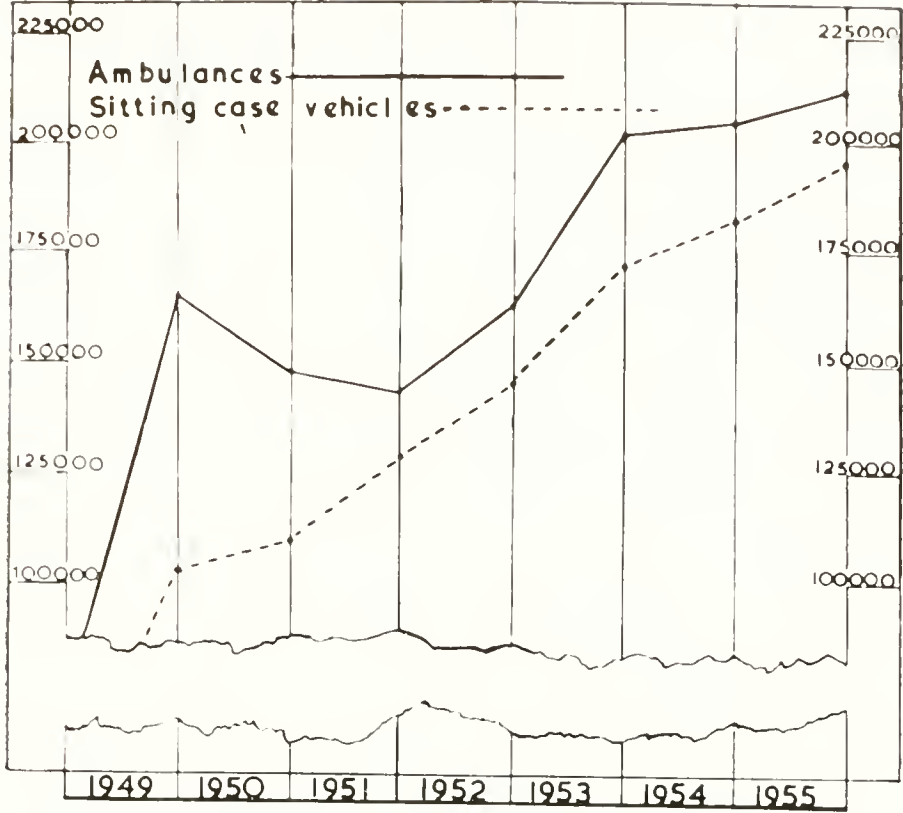
During the year, the ambulance service has been responsible for the maintenance of the "Mimitt" Analgesia apparatus.

*Transport of Premature Babies.* 1955 has seen the first completed twelve months during which the service has had experience in handling the special cots for the transport of premature babies.

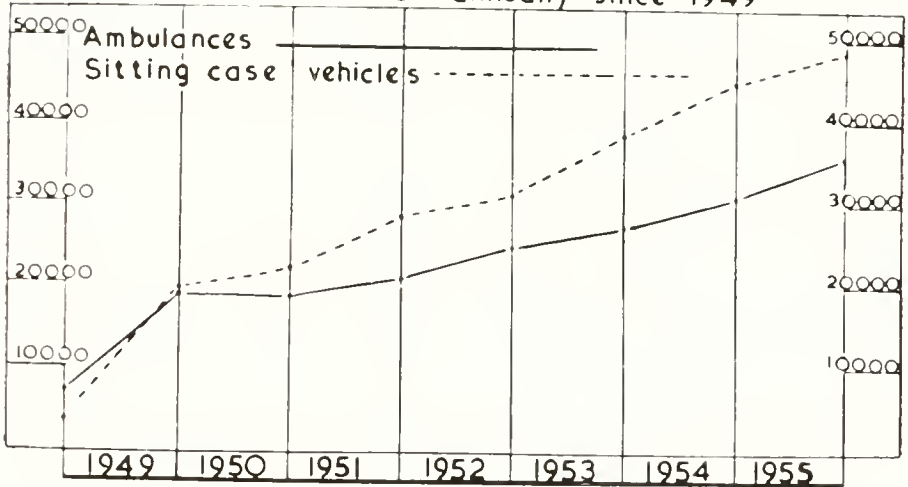
During the year the cots have been requested on 45 occasions for the transfer of delicate babies, 6 occasions being at the request of the East Riding County Council. In each case the transfer has been carried out satisfactorily and at no time has there been a breakdown or has any fault developed.

Originally it was anticipated that some reasonable notice of request for the use of the cot would be received at the Ambulance Service Headquarters, but experience has shown that often the first indication received is for the supply of

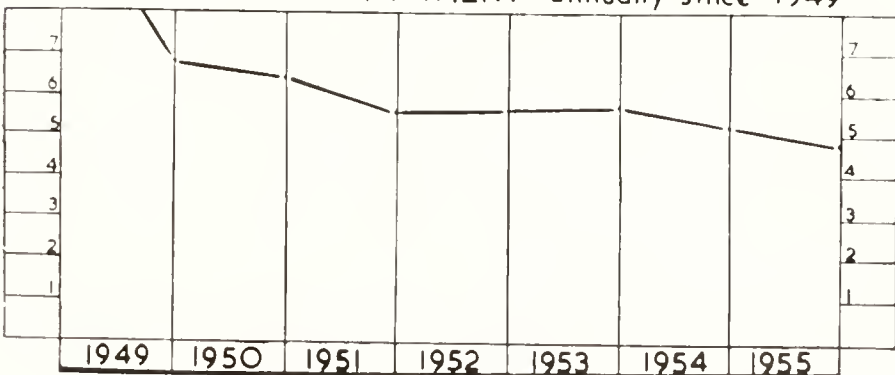
MILEAGE annually since 1949



NUMBER OF PATIENTS annually since 1949



AVERAGE MILES PER PATIENT annually since 1949



Average demands per three hour period on a normal day

100  
90  
80  
70  
60  
50  
40  
30  
20  
10

1 a.m. to 3 a.m.	3 a.m. to 6 a.m.	6 a.m. to 9 a.m.	9 a.m. to 12 noon	12 noon to 3 p.m.	3 p.m. to 6 p.m.	6 p.m. to 9 p.m.	9 p.m. to mid night
4	3	13	95	75	45	15	5

Average number of patients daily during 1955

325  
300  
275  
250  
225  
200  
175  
150  
125  
100  
75  
50  
25

Sun	Mon	Tues	Wed	Thurs	Fr	Sat
41	314	285	311	291	32	108

the cot on an emergency basis. In all cases it has proved possible to deal with this emergency, but it has necessitated one cot being maintained in a heated condition for 24 hours every day.

*Day Nursery Service.* Throughout the year the service has provided transport, in charge of a female driver, for transporting children under 2 years of age to and from the Day Nursery in Pearson Park. The children are collected at two agreed loading points at 8.30 a.m. in the morning and returned to these places at 4.30 p.m. in the afternoon. Altogether some 6,201 children were transported during the year, representing a total mileage of 6,523.

*Home Nursing Service.* During the year 3 Douglas Vespa Motor Scooters were purchased, making a total of 4, for the use of the male nurses for their daily visits. The male nurses have to cover considerable distances in their daily calls and these machines have enabled them to carry out their work more expeditiously and more satisfactorily. During the year the machines covered a total of 17,903 miles.

*Mental Health Service.* In addition to the normal carriage of patients for mental treatment, during the year the ambulance service has provided transport in respect of the mental health services carried out under Section 28 of the National Health Service Act and under the Mental Deficiency Acts covering a total distance in this respect of 13,856 miles, which is almost the same as that covered in 1954.

It is possible that demands for transport in respect of these services will grow with the increased emphasis on the home treatment of mental and other illnesses.

*Mortuary Service.* The ambulance service has now completed its fourth year of responsibility for the transfer of bodies to the City Mortuary. During the year 249 bodies were transferred by the ambulance service to the City Mortuary over distances totalling 1,367 miles.

*Mobile Immunisation Clinic.* The use of this clinic was considerably increased during 1955 and it travelled a distance of 2,655 miles compared with 1,220 miles the previous year.

Certain modifications were made to the Mobile Clinic during the autumn including the provision of a hot water system, heated by calor gas, and an additional calor gas heater and cylinder were installed. The vehicle has been used to implement the normal services for vaccination against smallpox and immunisation against diphtheria and whooping cough, as well as for the B.C.G. vaccination campaign.



*Delivery Van Service.* The service has continued to provide vans for the supply and delivery of materials, etc. for various other sections of the Department. 5 vans were involved and these have been in operation for a total of 6,517 running hours, covering in that time a distance of 31,648 miles.

The 3 main items in respect of which these vans are used are:

(1) Disinfecting Station	....	8,877 miles
(2) Disinfestation Service (Sanitary)	... ..	5,541 ..
(3) Distribution of welfare foods, etc.		4,505 ..

In addition the vans were used, by arrangement, to transport laundry for the Hull "A" Group Hospitals, being engaged for a total running time of 564 hours.

*Premises.* The headquarters of the Ambulance Service continued to be housed in Scarborough Street in buildings and huts previously forming part of the Disinfecting Station. Some vehicles continued to be housed at the Police Garage in Guildhall Road, whilst the Maintenance Garage, Waterloo Street, acted as Depot for the female drivers and their vehicles.

In April the Minister of Health approved in principle the Council's plans for the erection of a Central Ambulance Station in Osborne Street, where, it is hoped, the whole of the Ambulance Service activities will be based. At the end of the year, the City Architect had completed working drawings and had invited tenders for the project.

*Vehicles.* 1955 saw the instigation of a new type of ambulance vehicle with a new colour scheme and displaying a road safety slogan on the rear doors of the ambulance.

The new colour for ambulances and sitting case vehicles is in accordance with the traditional colours of the Hull coat of arms, and is a two-tone metalescent blue. The ambulances display the normal coat of arms of the City prominently on the vehicle.

It is intended that all future vehicles should be of this colour so that the City will have a fleet of ambulances distinctive in all respects. All the new vehicles, both ambulances and sitting case cars, carry on their rear doors a short road safety slogan in red. As far as is known, no other ambulance service in the country has displayed red safety slogans in this manner and the innovation was particularly appropriate as they first appeared at the time when the new highway code came into effect.

During the year 2 new ambulances came into commission in March and 2 new sitting case cars in December.

In addition to the outward attributes, the 2 new ambulances were fitted with special stretcher gear incorporating a fixed foam-rubber bed on to which the patient is lowered, thus materially increasing the comfort of the patient, and stretcher patients who have been obliged to travel to clinics on a regular basis have commented from time to time on the difference in the ride between the older type of ambulance and the new.

At the 31st December, 1955, the composition of the fleet was as follows:

	20 Ambulances
	2 Ambulances retained for Civil Defence Training only
	10 Sitting Case Vehicles
	4 Midwifery Service Cars
	2 Day Nursery Vehicles
	1 Mobile Clinic
	1 Mortuary Service Vehicle
	5 Delivery Vans
	5 other Cars
	1 Food Inspection Branch Truck
	—
Total	51 Vehicles

In addition to the above vehicles, the Service has 4 Douglas Vespa Motor Scooters for the use of the male nurses engaged in Home Nursing Duties.

*Personnel Establishment.* The following schedule shows the strength of the Ambulance Service as at 31st December, 1955:

2 Officers
1 Station Superintendent (Days)
4 Chargehands (Shifts)
2 Telephonists (Shifts)
3 Clerical Staff (Days)
22 Male Drivers (Days)
32 „ „ (Shifts)
12 Female Drivers (Shifts)
7 Maintenance Staff
—
85 Total
—

*Maintenance of Fleet.* The ambulance service is fortunate in that it has its own workshop where every type of repair can be carried out, with the exception of cellulosing. A system of regular preventive maintenance secures that vehicles are kept in good condition and by means of a speedy turnover of vehicles ensures that the service can respond to its commitments at all times.

The present maintenance facilities at Waterloo Street are far from ideal but it is hoped that the construction of the proposed new Central Ambulance Station in Osborne Street will obviate this difficulty.

*Civil Defence Ambulance and Casualty Collecting Section.* The training of Civil Defence Volunteers for the above Section has progressed satisfactorily throughout the year at evenings and week-ends and a good standard of operational efficiency has been attained by those who have attended the classes regularly. Driving instruction has also been given on a regular basis, but this work has proved more laborious as the majority of trainees have no experience whatsoever before joining this Section. Nevertheless, good progress has been made and several of the trainees have participated in Regional Civil Defence exercises as drivers without mishap. Volunteers have participated in exercises in Leeds, York and Beverley during the year and have discharged their duties with every satisfaction. It is understood that the ambulance section has the honour of possessing the highest number of active volunteers of any Civil Defence Section in the Hull Division and every effort is made to retain the interest of these keen volunteers by a varied and interesting syllabus on practical lines.

At the end of 1955, 30 volunteers were regarded as active and of these 7 are qualified drivers and another 10 are in the course of driving tuition.

## SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

*Tuberculosis.* See page 159.

A summary of the applications received for services provided under this Section is given in Table XXXII, page 128.

*Nursing Requisites.* Articles are available on loan from the Department for patients who are being confined or nursed at home. A small charge is made for this service, but if an applicant is unable to pay the tariff charge the case is considered on an income assessment basis, when the standard charge may be reduced or waived. By arrangement with the Corporation the Hull Voluntary Health Scheme pay loan charges on behalf of their members.

The number of applications received from or on behalf of patients increased again on the previous year, and it was found necessary to continue to order additional stocks of articles as well as replacing those worn out. Visits were made to patients' homes by health visitors and mental health workers to check up on articles on loan and to advise on replacement or the loan of additional articles, and the collection of those no longer needed: the District Welfare Officers also assisted in this aspect of the service.

The numbers of commodes and wheelchairs on loan at the end of the year showed a considerable increase from the previous year. This is largely due to the fact that in the majority of cases they are on loan to the elderly infirm who require them for extended periods of time.

In one case a bedstead had been loaned on an emergency basis to a blind person who was not otherwise ill or disabled and the District Welfare Officer was asked to approach the National Assistance Board regarding the provision of a bedstead in view of the fact that it was a household necessity and not a nursing requisite. Ultimately, a member of the After-Care Section clerical staff obtained a bedstead and mattress for the sum of 15s. 0d., which amount was reimbursed by the Assistance Board through the District Welfare Officer. The bedstead and mattress were disinfected, delivered to the patient and the Department's bedstead recovered.

The applications granted during the year were in respect of the following illnesses, and showed an increase of 85 over the 1954 total:

Confinement	....	....	....	108
Cancer	..	....	....	88
Senility	..	....	....	191
Cerebral hæmorrhage	..	....	....	110
Disease of the Heart	....	..	....	108
Tuberculosis	..	....	....	39
Fractures, Accidents etc.	..	....	....	80
Diabetes	....	....	....	34
Pneumonia, Pleurisy	....	....	....	32
Asthma and Bronchitis	....	....	....	63
Rheumatism, etc.	....	....	....	47
Mental Deficiency	....	....	....	5
Others	..	....	....	285
				<hr/>
Total				1,200
				<hr/>

The number of articles dealt with was as follows :

	<i>On loan at 31/12/54</i>	<i>Issued during 1955</i>	<i>On loan at 31/12/55</i>
Bedsteads and Cots	74	128	77
Bedsteads with Lifting Poles	—	5	5
Mattresses, Dunlopillo	39	111	53
Mattresses, Hair	65	99	64
Bedding, various items	904	1,446	787
Sheets, waterproof	169	477	176
Air Rings	98	324	97
Backrests	108	303	124
Bedpans, Urinals etc.	243	737	274
Commodore	26	125	74
Dishes, jugs, etc.	3	14	8
Scales (Diabetic)	9	34	20
Wheelchairs	31	149	90
Sponge Rubber Cushions	—	10	9
Miscellaneous	115	280	180
	—	—	—
Totals	1,884	4,242	2,038
	—	—	—

During the year attention was drawn to the need to provide additional facilities for home bound persons suffering from disabling conditions whose needs could not be met by the existing "Loan of Nursing Requisites Scheme". It was also felt that the link between hospital treatment of these cases and their care by the Local Authority should remain unbroken to ensure that they would not come to our notice ultimately as cases experiencing extreme difficulty with their disabilities. A number of cases were visited and it was clear that in at least some of them, advice on the means of overcoming their difficulties or the provision of a suitable gadget, perhaps costing very little, would be of great assistance in preventing deterioration of their condition; in others more complete arrangements would need to be provided, even to adapting the house by such measures as widening doorways, providing ramps, and so on. Preliminary discussions took place between the

Senior Medical Officer (Care and After Care), an Orthopaedic Specialist, the Superintendent Nursing Officer, and the Occupational Therapist, and a scheme was formulated whereby case conferences would take place from time to time regarding patients to be discharged from hospital, at which the best means of assisting the patient could be decided upon, having regard to the disability and the home and social circumstances. A proposal to this effect was submitted to the Health Committee, approved by the Council, and will take effect from April 1st next. This will undoubtedly provide great relief to patients who are at present struggling to overcome their disabilities and improve or, at least, maintain their physical condition. The case conference would also provide a means of concentrating all available resources to assist a patient, and would enable an agreed decision to be reached, not only regarding the nature of the assistance to be given, but also the source of such assistance and, if it is to be provided from outside the scope of the Health Department's schemes, the particular officer who would follow it up to ensure that all appropriate action was taken.



TABLE XXXII

## NATIONAL HEALTH SERVICE ACT, 1946—SECTION 28

## APPLICATIONS FOR THE PROVISION OF SERVICES OR THE LOAN OF ARTICLES

SERVICE	No. of Applications Received	TUBERCULOSIS CASES			OTHER CASES			TOTAL 1955		TOTAL 1954	
		GRANTED		*Not Granted	GRANTED		*Not Granted	GRANTED	*Not Granted	GRANTED	*Not Granted
		Free	On Full or Part Payment		Free	On Full or Part Payment					
Loan of Nursing Requisites	1200	18	21	—	428	733	—	1200	—	1115	—
Provision of Extra Nourishment (Milk)      ....	115	110	—	5	—	—	—	110	5	98	11
Provision of Clothing      ....	111	109	—	2	—	—	—	109	2	41	8
Maintenance at Convalescent Homes      ....	117	—	1	2	—	80	34	81	36	59	16

\* "Not Granted" includes all applications which were cancelled, not approved or withdrawn after approval.

*Occupational Therapy.* The Domiciliary Occupational Therapy Service started on January 10th, 1955.

During the first month plans were made for the running of the service, orders were placed and visits paid to the chest clinics, the De la Pole Hospital, Brandesburton Hall and other places. An Occupational Therapy prescription form was devised for completion by the patient's general practitioner or consultant and included the diagnosis, special precautions to be observed and prognosis as regards future employment.

The occupational therapy service was welcomed by the chest clinics, hospital almoners, social workers and health visitors and many patients have been referred through these channels. All these departments have been most helpful and co-operative.

The patients themselves welcomed the opportunity of being given something to do. One tuberculous patient who had been trying to obtain some occupation for about two years, said that prior to doing occupational therapy his only interest had been his next door neighbour's new hats. This patient has become an expert basket worker. Another patient said that he had not realised the interest which the Local Authority took in their well-being.

Patients generally preferred to be introduced by their doctor or the almoner rather than be descended upon by a stranger announcing she was the Occupational Therapist. Where the matter had not previously been discussed with the patient it was usually found expedient for the Occupational Therapist to advise what could be done and then visit again the following week.

Three patients refused occupational therapy as they already had hobbies which kept them occupied.

Domiciliary patients were visited weekly, fortnightly, or monthly depending upon the need of the individual case. Prescription forms were received for 95 patients. These were classified as follows:

Respiratory	72
Neurological	9
Orthopaedic	4
Psychiatric	6
Elderly Persons	4
	—
	95
	—

Many more patients could have been dealt with but this was not possible owing to the Occupational Therapist working single-handed. Provision has been made therefore for the appointment of an assistant Occupational Therapist in the next financial year.

Tuberculous patients benefit particularly and usually their work is of a high standard. Elderly and psychiatric patients need more instruction and supervision than can be given in a weekly visit and would benefit from some initial instruction at a Centre where, also, they would be helped by the social contacts they would make.

Materials and equipment are generally purchased from craft firms at wholesale prices. Patients are lent tools and equipment and they may purchase the articles they make or hand them over for disposal by the Health Department. In exceptional cases materials may be supplied free to a patient at the Committee's discretion, and this was done in respect of one patient. Patients are charged the cost of the materials they use plus 5% to cover wastage and handling expenses.

Soft goods prepared by tuberculous patients were collected and sterilised by the Disinfecting Station prior to sale to the public.

From February to November three classes per week were held at 77 Lowgate for nine adult male defectives. Their ages ranged from 17 to 42 and none of them had ever held a job for more than a few days. Initially they appeared incapable of learning crafts but each week they became more teachable and their standard of work improved steadily. They enjoyed their classes very much and several of them quickly showed considerable craft ability. Most of the articles they made were bought by their friends or relations who were appreciative of what was being done and were surprised that they could produce such excellent work. One boy who was very shy and hesitant at the start, showed considerable promise and received much praise for his work. He has now become much more confident and it is hoped that employment will be found for him. These nine mental defectives were ultimately transferred to the male Adult Occupation Centre which opened shortly before Christmas, and so provided the nucleus of a rapidly expanding Centre.

After the Domiciliary Occupational Therapy scheme had been working for some months it became evident that some means of selling articles to the public had to be found. Patients sold articles to their relatives and neighbours and sometimes it was possible for the Occupational Therapist to obtain orders, but there was still a balance of articles for disposal. In November, a showcase was installed in the window of 76 Lowgate (the After-Care Section Office) for the

purpose of displaying articles for sale and has proved very successful, some 140 articles being sold by the end of the year. The provision of this facility has been much appreciated by the patients who receive any profit made on the sale of their articles.

Various shops in the City were approached for orders early in December. One shop gave a substantial order and subsequently had no difficulty in disposing of the articles. The question of the sale of produce is an important one as patients are more likely to take an interest in handicrafts if they can be assured that their efforts will not be wasted. Seasonal trends need to be followed, too, especially before Christmas and during the summer months at which times articles suitable for presents and picnics would appear to sell with reasonable ease. Some articles find a more ready sale than others, and patients were advised accordingly when considering their proposed activity.

*Recuperative Holidays and Convalescence.* Of the 80 cases granted recuperative holidays, 64 were accommodated at a Private Guest House at Bridlington, where the Health Committee had two rooms reserved for the period May to October, the remaining cases being sent to normal Convalescent Homes.

Several patients sent for a recuperative holiday were suffering from nervous debility and in each of these cases arrangements were made for the Mental Health Workers to visit them on their return home. This follow-up system proved most helpful to the patients concerned.

One of the cases referred for a recuperative holiday, first brought to notice by a District Welfare Officer, was that of a man, aged 77 years, who had had both legs amputated above the knees, and was a diabetic. As the patient was not ambulant he was visited by the Senior Medical Officer (Care and After-Care) who found him extremely unhappy and depressed, mainly because of concern for his wife, aged 66 years, who had had to nurse him for a considerable period of time, which task was becoming too much for her. His dearest wish was either to be admitted to hospital or to die so as to relieve his wife of the burden. Both the patient and his wife were in a distressed condition, appearing to have no relatives or friends to visit them and had lived many months in a wretched state of mind. The Senior Medical Officer was able to arrange for the man to be admitted to hospital the morning following his visit, and the wife was sent for a recuperative holiday later.

At the end of the year the man continued to be a hospital in-patient, and is likely to remain so as the task of caring for him at home had become beyond his wife's capacity.

*Veneral Diseases.* Treatment for cases of venereal disease arising in the City and port area continued to be available at the Mill Street Clinic which is administered by the No. 4 Hull (A) Group Hospital Management Committee of the Leeds Regional Hospital Board.

The follow-up of patients and the tracing of contacts is undertaken by the staff of the Health Department. Female cases are dealt with by the Health Visitors as part of their normal district work, whilst a male clerk carries out the work in connection with male patients.

The following table has been extracted from the Annual Return kindly furnished by Dr. C. P. Heywood, Consultant Venereologist:

TABLE XXXIII

NUMBER OF PATIENTS ATTENDING THE MILL STREET CLINIC  
FOR THE FIRST TIME DURING 1955.

	Syphilis		Gonorrhoea		Other Conditions		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	Total
Syphilis—Primary .....	6	—	—	—	—	—	6	—	6
Secondary .....	—	1	—	—	—	—	—	1	1
Latent in 1st year of infection .....	1	—	—	—	—	—	1	—	1
Cardio-Vascular .....	2	3	—	—	—	—	2	3	5
Of Nervous System .....	5	1	—	—	—	—	5	1	6
All other late or latent stages .....	11	8	—	—	—	—	11	8	19
Congenital—under 1 yr. ....	—	1	—	—	—	—	—	1	1
Congenital—over 1 yr. ....	—	—	—	—	—	—	—	—	—
Gonorrhoea .....	—	—	177	41	—	—	177	41	218
Chancroid .....	—	—	—	—	7	—	7	—	7
Lymphogranuloma venereum ..	—	—	—	—	—	—	—	—	—
Granuloma Inguinale .....	—	—	—	—	—	—	—	—	—
Non-gonococcal urethritis (males only) .....	—	—	—	—	160	—	160	—	160
Any other conditions requiring treatment .....	—	—	—	—	639	70	639	70	709
Conditions not requiring treatment .....	—	—	—	—	—	—	—	—	—
Conditions still remaining undiagnosed .....	—	—	—	—	—	—	—	—	—
	25	14	177	41	806	70	1008	125	1,133

*Health Education and Publicity.* Circulars were sent out addressed to the Secretaries of Women's Institutes, Guilds, Clubs, Mother's Unions and other organisations, informing them that the Health Department was prepared to provide lectures on health matters and inviting them to choose their subject from the following list:—Cancer, Maternity and Child Welfare, Immunisation, School Health, Mental Health, Home Safety, Prevention of Disablement, Food Hygiene, Epilepsy, Tuberculosis, B.C.G. Vaccination and Prevention of Infectious Diseases. As a result, lectures on the following subjects were given by medical officers of the Department, the Superintendent Nursing Officer, a mental health social worker and a general practitioner:

Food Hygiene	4	Prevention of Infectious Diseases	1
Home Safety	3	Home Nursing	1
Prevention of Disablement	3	School Health	1
Mental Health	3	Tuberculosis	1
Cancer	2		

In August, the Senior Medical Officer (Care and After-Care), attended a Summer School at Bangor arranged by the Central Council for Health Education, the theme of which was "Opportunities and Methods in Health Education" and valuable information and ideas were noted, particularly the worth of the flannel-graph visual aid when lecturing.

In conjunction with the Ministry of Agriculture, Fisheries and Food, an exhibition was held in the Mortimer Museum from Monday 11th to Saturday 23rd July. During that period 6,500 people visited the exhibition and it was thought that, whilst this was very satisfactory, the attendance would have been greater had it not been for the fact that for the whole fortnight the weather was extremely hot. On the first day of the exhibition, a lecture was given to members of the food, grain and warehousing trades etc., this included a film show.

The cinema projector purchased towards the end of last year was in regular use. Programmes of suitable films were shown at all child welfare clinics once a month in conjunction with the health visitors' teaching programmes.

The topic exchange display unit continued to be exhibited at clinics, the Central Food Depot, and in the main entrance to the Guildhall. Five different health topics were displayed in the course of the year.

## SECTION 29—DOMESTIC HELP

The administrative staff is the same as last year; one Home Help Organiser, one Assistant Organiser and two full time Clerks.





## MENTAL HEALTH SERVICE

### (SECTIONS 28 AND 51)

During the year, the Mental Health Section of the Department underwent considerable re-organisation. Prior to this change the section was divided into three sub-sections — Duly Authorised Officers, Mental Deficiency Officers and Social Workers. When the post of Senior Duly Authorised Officer became vacant early in the year, the opportunity was taken to amend the establishment to allow of the appointment of a Senior Mental Health Worker to be responsible for the work of all the other officers, who, themselves, were re-designated Mental Health Workers. It was felt that the old designations suggested officers with duties confined to the various Acts under which they were authorised. The post of Psychiatric Social Worker, which had remained vacant since September, 1948, owing to lack of applicants, was abandoned.

Advantages of the re-organisation are firstly, that all the work of the section is placed under one officer, while secondly, certain officers are authorised under both the Lunacy and Mental Deficiency Acts, thus doing away with the question of where one officer's duty ends and another's begins in such cases as mental defectives showing psychiatric disorders. Furthermore, time and expense can be saved by one officer visiting both psychiatric and mental defective patients in the same area or, indeed, in the same street, rather than have two officers attending the two classes of cases separately. It is felt that these changes will encourage a more positive outlook on mental health by all concerned with the service.

In my last Annual Report reference was made to a proposal for opening a Psychiatric Club in conjunction with the Leeds Regional Hospital Board. Many setbacks were experienced and, at the end of 1955, the final decision of the Regional Hospital Board was still awaited. It was originally planned that the premises 449 Holderness Road, formerly a Day Nursery, would be utilised, but when this was found to be impossible, the use of the vacant James Reckitt Hostel was agreed upon.

During the year, the Mental Health Sub-Committee proceeded to implement its policy of extending the services available for the welfare of mentally defective persons and their families.

Under the supervision of the Occupational Therapist, a class of nine adult male defectives was started in February, the trainees attending three morning sessions each week at 77 Lowgate. Activities included handicrafts such as rug-making and basketry, and the advantages of the scheme were soon obvious. The trainees were delighted at the opportunity of being given something useful to do

rather than idle at home or run errands, and some of them, at least, perhaps for the first time, felt that they had a productive place in the community, with the result that a steady improvement in outlook and behaviour was apparent. They gained great satisfaction from producing good quality work and only the best was expected from them when, with training and practice, they were found able to perform certain tasks. Encouragement and appreciation of their work was a tonic to them.

As a result of this successful experiment, a survey was carried out to ascertain the extent of the need for adult occupation centres and it was discovered that there were at least sixty-five male and sixty-eight female defectives over sixteen years of age whose parents wished to take advantage of such Centres.

Accommodation for a temporary Male Adult Occupation Centre was made available on the first floor of the Health Department stores at 2, George Yard, and this was opened shortly before Christmas.

Consideration was also given to the provision of a Female Adult Occupation Centre, but the question of accommodation was more difficult to solve than in the case of the Male Centre. Finally, it was agreed that the premises 449 Holderness Road might be used for this purpose in conjunction with a Day Centre for the more severely retarded mental defectives, of whom there are about seventy-five whose parents would appreciate arrangements for their care during one or more days each week. The provision of this type of Centre would materially help the parents of defectives in need of constant care and supervision, giving them some relief from the strain of unending vigilance. It is anticipated that the plan for utilising 449 Holderness Road will be completed early in 1956, and that both the Female Adult Occupation Centre and the Day Centre for low-grade mental defectives will open about October.

Plans for the erection of a new Children's Occupation Centre were completed during the year and it is hoped that building will commence in the Spring of 1956. The site for this Centre is at the junction of Leads Road and Tweendykes Road and approval has been given to the earmarking of adjoining land for the erection of a combined Male and Female Adult Occupation Centre to supersede the temporary arrangements mentioned in the preceding paragraphs.

I would like to express my appreciation of the remarkable help given throughout the year by Dr. J. Newcombe, Physician Superintendent of Brandesburton Hall and Consultant in Mental Deficiency for this area. The waiting list for admission to mental deficiency institutions has been considerably reduced, whilst, in addition, he has arranged for weekend or similar short-term care to be given to patients whose



THE HOME NURSE AT WORK





THE ADULT OCCUPATION CENTRE OPENED IN DECEMBER, 1955

parents wished to be free for a few days. Such assistance must be of great benefit to parents who would otherwise have no respite from the care of their mentally defective charges.

### (I) ADMINISTRATION

(a) *Constitution of Mental Health Sub-Committee.* The Mental Health Service is administered by the Mental Health Sub-Committee of the Health Committee. The Sub-Committee comprises eight members, and the Medical Officer of Health attends meetings in an advisory capacity. Meetings are held each month during the week preceding the meeting of the Health Committee.

(b) *Staff.* At the end of the year the Mental Health Staff, working under the direction of the Medical Officer of Health, consisted of:

Establish- ment	Appointment	Name	Qualifications
1	Senior Medical Officer (Care and After-Care)	Dr. C. H. Phillips	M.R.C.S., L.R.C.P., D.P.H.
1	Senior Mental Health Worker	Mr. E. Elliott*	Cert. of R.M.P.A., R.M.N.
8	Mental Health Workers	Mr. F. Branton* Mr. W. Forward* Mr. A. C. Willby* Mr. V. L. Wilson* Mrs. F. Pocklington Mrs. E. McCreadie Miss B. M. Waters Miss M. Austin	Cert. of R.M.P.A., R.M.N. Cert. of R.M.P.A., R.M.N. Cert. of R.M.P.A., R.M.N. Cert. of R.M.P.A., R.M.N. Cert. of R.M.P.A., R.M.N. Cert. of R.M.P.A., R.M.N. Diploma in Social Studies B.A. (Social Studies)

\*Authorised under Lunacy and Mental Treatment Acts.

#### *Children's Occupation Centre*

1	Supervisor	Miss G. A. Wheelband	Diploma of National Asscn. for Mental Health
6	Assistant Supervisors	Miss M. Clarkson Mrs. I. Beacher Mrs. I. Branton Miss E. Leavis Mrs. W. Hudson Miss S. A. Dawson	Diploma of National Asscn. for Mental Health

#### *Male Adult Occupation Centre*

1	Supervisor	Mr. W. M. Joy	Min. of Ed. Teaching Cert.
1	Instructor	Mr. H. Parsons	Cabinet Maker



## (II) ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY

(a) *Section 28, National Health Service Act, 1946, Prevention, Care and After-Care.*

				Interviews and Visits	New Cases
Neurosis	....	....	...	747	61
Miscellaneous	....	....	...	508	80
After-Care	....	....	..	556	76
Ex-Service	..	....	..	8	3
Total	....	....	.	1,819	220

There is very little difference in the figures from last year, new cases having decreased by seven while visits increased by 38. 16·4% of all cases notified throughout the year were over 60 years of age.

The Department's Mental Health Workers continued to attend at hospital out-patient clinics. At the request of the Consultant Psychiatrist, the number of clinics attended was increased from two to three each week, as from March.

The number of cases referred to the Department from the Mental Hospital was slightly less than in 1954. The weekly discussion meetings with the Medical Superintendent and the Medical Officers at the Hospital have continued.

Of the three ex-service cases notified in accordance with the terms of Circular 81/50, one avoided visits and did not reply to correspondence, one is attending the Rehabilitation Unit and the other, who so far has refused help, is still being visited.

Patients referred from other sources have almost doubled. This may be due in part to the number of old people, who, although to some extent mentally ill, are able to manage fairly well at home with some supervision. One old lady for instance believes that her home is invaded at night by people who gain entrance through cracks between the floor boards, but otherwise she is quite sensible and able to look after herself and her brother. The various services concerned are satisfied that she is in no danger and fortunately the neighbours are tolerant. She refuses "charity", offers of clothing, etc., but is in receipt of the maximum amount of National Assistance. Supervision is confined to noting any deterioration in the patient's mental, physical or social condition and to acting as a safety valve for her natural indignation against the "invaders".

Group work continued throughout the year. Patients are encouraged to help themselves and others and suitable cases have been introduced to each other with some success.

As they arise, the special social needs of all classes are met by reference to the Church, the voluntary services, the national and local Welfare Services, to whom thanks are due for their practical help and consideration in these sometimes very difficult cases.

Employment and accommodation continued to present difficult problems for some persons recovering from mental illness. The Disablement Rehabilitation Officer and other employment officers have been unstinting in their help in regard to employment, but the question of accommodation remains almost insoluble, especially for the single or elderly person without relatives. Even if hostel accommodation were available many of these people could not be recommended owing to their solitary and or eccentric habits. Single units, perhaps of the bed-sitting-room type, would be a great help.

Talks on the various aspects of their work were given by the Mental Health Workers to several Clubs and Guilds.

(b) *Lunacy and Mental Treatment Acts, 1890-1930.* Except for an increase of 31 male patients admitted to the Western General and the De la Pole Hospitals under the provisions of Section 20, Lunacy Act, 1890, the admission rate for the year under review follows that of 1954.

The statistics reveal that 191 male patients and exactly the same number of female patients were admitted to observation wards. This is a most unusual feature as female admissions are generally in excess of males.

Of the total number of admissions for the year (775), the highest proportion comes from the aged persons group (men and women over 60 years of age), 277 being admitted—a percentage of 35. The admission rate for other age groups follows the trend of the past three years.

Vacancies in geriatric or chronic sick wards were very scarce and sometimes a senile patient requiring hospital attention had to be dealt with eventually under the Lunacy Acts, when geriatric treatment was really indicated at the onset of the illness or senile decline. Late in the year the newly started geriatric service in Hull was responsible for a slight easing of the problem of aged persons being admitted to hospital. Many aged persons inadequately cared for at home because of relatives



Admissions under Section 16 (Certified patients)  
direct from own homes—

To De la Pole Hospital	4	27	31
To Broadgate Mental Hospital	—	1	1
	<hr/> 4	<hr/> 28	<hr/> 32

*Mental Treatment Act, 1930*

Admissions under Section 1 (Voluntary patients)

To De la Pole Hospital	149	195	344
To Broadgate Mental Hospital	4	—	4

Admissions under Section 5 (Temporary patients)

To De la Pole Hospital	—	2	2
To Broadgate Mental Hospital	1	—	1

154	197	351
-----	-----	-----

Total direct admissions	350	425	775
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Change of Status

From Lunacy Orders to Voluntary Class—Section 1 Mental Treatment Act, 1930—

At De la Pole Hospital	43	97	140
At Broadgate Mental Hospital	4	—	4

From Section 20, Lunacy Act, 1890 to Section 16 (Certified)—

At De la Pole Hospital	14	63	77
At Western General Hospital	39	4	43

100	164	264
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Removals

From Western General Hospital to De la Pole Hospital—

on becoming voluntary patients	20	2	22
on becoming certified	39	4	43

Under Section 26, Criminal Justices Act, 1948	—	1	1
---	---	---	---

Under Section 24, Criminal Justices Act, 1948	1	—	1
---	---	---	---

From Western General Hospital to Broadgate Mental Hospital—

on becoming voluntary patients	4	—	4
on becoming certified	8	2	10

From Kingston General Hospital to De la Pole Hospital on being certified

1	1	2
---	---	---

73	10	83
----	----	----

Miscellaneous	
Voluntary and other cases in which advice and assistance were given	303
Visits by Justices of the Peace to -	
Western General Hospital	93
De la Pole Hospital	63
Kingston General Hospital	3
Hull Royal Infirmary	2
Homes	49
	210
Property notices to the Welfare Services Department under the National Assistance Act, 1948	742
Pre-care visits	475
After-care visits	153
Transfers from other mental hospitals to De la Pole Hospital	2
Ineffective visits	37

(c) *Mental Deficiency Acts, 1913-1938.* Mental Health workers continued the supervision of the mentally handicapped living in the community.

					Males	Females	Total
Ascertained during 1955	....	....	....	....	33	28	61
Placed under Certificate	....	....	....	....	18	4	22
Awaiting vacancies in Institutions			....	....	8	13	21
Cases under Guardianship	....	....	....	....	—	2	2
Under Section 3 of the Mental Deficiency Acts					1	—	1
Cases under Supervision	....	....	....	....	237	274	511

During the year the Mental Health workers made 1,993 visits to patients under Statutory Supervision.

97 visits were made to homes of patients under Order of the Mental Deficiency Acts for the purpose of obtaining information on home conditions for use by the Visitors when making their decision as to whether the patients needed further treatment or continued licence.

On ten occasions parents took advantage of the facilities offered for short term care in Mental Deficiency Hospitals, the arrangements for admission being kindly made by the Physician Superintendent of Brandesburton Hall.

The Stipendiary and Juvenile Courts were attended in connection with 11 Statutory cases who had committed anti-social acts.

The Women's Voluntary Services and the Mental Health Workers themselves gave gifts of clothing and bedding to 46 needy patients and their parents.

24 patients under Statutory Supervision were accompanied on shopping tours and advised in the purchase of suitable clothing.

On the written request of various hospital Superintendents, 37 homes were visited in respect of parents who had asked if leave could be arranged for their sons or daughters who were under Order of the Mental Deficiency Acts. In most cases a suitable period of leave was recommended.

Appointments were made for 75 patients to receive optical and dental treatment, and, in most cases, they were accompanied by a member of the staff.

With the co-operation of the Ministry of Labour, eighteen patients were found suitable employment, whilst another twelve were found work through the personal endeavours of the Mental Health Workers.

20 patients under Order of the Mental Deficiency Acts, who were on licence to their parents residing within the area of Kingston upon Hull, had Quarterly Progress Reports submitted to their respective hospitals. Six of these patients were discharged from the Order.

In a review of the priority list of patients awaiting Institutional care, the parents of 13 female and 3 male patients decided against any action under the Mental Deficiency Acts. These parents were informed that if at any time an urgency arose they should notify the Department, but, in the meantime, statutory supervision would be continued.

Four female patients had their holiday arrangements booked by the Mental Health Section, two being accompanied both to and from their accommodation at Scarborough.

The Mental Health Sub-Committee allocated the sum of £45 for the purpose of buying Christmas fare for children under sixteen years of age. During the week before Christmas, fruit and sweets were presented by business people within the City for patients under 16 years of age. A number of needy families were also assisted with Christmas fare. The gifts of fruit and sweets were collected through the efforts of one of the clerical staff who has made it her business over a number of years to contact these generous donors.



*Occupation Centre for Mentally Handicapped Children.* The number of children attending the Occupation Centre increased to 89 during the year, 14 children being admitted while nine left the Centre. One of these had obtained employment, two were admitted to institutions, two left the City and four were removed by their parents.

At the request of the National Association for Mental Health a trainee supervisor attended the Centre in January as part of her practical training. Miss Dawson, this Department's trainee supervisor who commenced a course of training in Manchester in September, 1954, completed the course in July, 1955 and returned to duty as a qualified assistant supervisor on 6th September. Following her return, the Margaret Morris method of physical training was introduced into the work of the Centre.

Margaret Morris Movement is an expressive form of dancing which may be performed to records or to the piano. The music assists the children to make full use of their imaginations, while the movements themselves provide a suitable form of exercise which encourages rhythmic breathing and improves deportment. In addition, the self-expressed movements tend to free the children of tension and make them more relaxed, both mentally and physically. Most children obtain great enjoyment and satisfaction from this form of dancing.

A further trainee supervisor took up duty on the 2nd May, 1955 and proceeded to Manchester on the 12th September to undertake the training course organised by the National Association for Mental Health but unfortunately she found it necessary to withdraw from the course during November and resigned her appointment. During July one of the assistant supervisors attended a refresher course in London arranged by the National Association for Mental Health.

An inspector from the Board of Control visited the Centre in March and recommended that the teaching of the 'three Rs' be discontinued. The Occupation Centre Supervisor was advised accordingly and now instruction will only be given in those cases where a pupil shows any real aptitude. Other visitors included groups of sister tutor students, university students and student health visitors. The Centre was also visited on several occasions by the Occupational Therapist who gave advice and help regarding different forms of work.

An outbreak of dysentery occurred at the Occupation Centre on 27th January, 12 children being affected in the first instance. Samples were taken and eight of these children, who were found to be excreting shigella sonnei, were referred to their family doctors for treatment. On 7th February parents of the children remaining at the Centre were asked to co-operate in preventing further spread of

infection by permitting their children to be given treatment with Sulphasuxidine tablets. All except two parents agreed and the treatment was given to 50 children, 45 of whom took the whole course.

During the outbreak over 300 samples were taken, 45 of which were positive, involving 23 children. Nine remained positive after one week's treatment given by their doctor, and of these, two remained positive after still further treatment. There were no positive cases amongst the 50 children and nine staff who received treatment at the Centre.

The outbreak cleared up towards the middle of March.

The following table shows when the positive cases occurred:

<i>Week ending</i> ...	<i>5th Feb.</i>	<i>12th Feb.</i>	<i>19th Feb.</i>	<i>26th Feb.</i>	<i>5th Mar.</i>	<i>12th Mar.</i>
1st Positive	10	9	3	—	1	1
2nd Positive	—	2	2	4	—	1
Subsequent Positives	—	—	2	7	1	—

*Male Adult Occupation Centre.* This Centre was opened at the end of the year. The accommodation comprises one large room which is the whole of the first floor of the Health Department's store at 2, George Yard, and is situated a few yards from the Department's administrative headquarters at the Guildhall. Approximately 40 adult male defectives can be accommodated at the Centre where various handicrafts will be taught, particularly in relation to woodwork.

Initially the Supervisor and one Instructor were appointed and the adult male defectives who had been attending the class run by the Occupational Therapist at 77 Lowgate were transferred to the Centre. It is proposed to increase the number of trainees gradually until the maximum of 40 is reached, whilst two further Instructors will be appointed when necessary to maintain a ratio of one staff for each 10 trainees.

The Centre is open Monday to Friday, 9.30 a.m. to 12 noon and 2 p.m. to 4.30 p.m. Goods produced will be sold to help defray the cost of running the Centre.

*Ambulance Service.* Ambulances and other vehicles for mental health work continued to be provided by the Health Department Ambulance Service. The Ambulance personnel rendered valuable assistance by maintaining a smooth and helpful co-operation.



PART IV

INFECTIOUS DISEASES  
TUBERCULOSIS, ETC.

## PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES

*General.* The principal notifiable infectious diseases are—tuberculosis, scarlet fever, diphtheria, malaria, erysipelas, acute primary pneumonia, smallpox, dysentery, enteric fever, acute poliomyelitis, acute encephalitis, meningococcal infection, ophthalmia neonatorum, pemphigus neonatorum, puerperal pyrexia, measles, whooping cough and food poisoning, and in addition in Hull the following diseases are voluntarily notifiable—chickenpox, gastro-enteritis, glandular fever, herpes zoster, infective hepatitis, influenza, Weil's disease, mumps, Q. fever, ringworm, rubella, scabies, undulant fever.

The total number of notifications of the principal notifiable diseases, except tuberculosis, in 1955 was 5,160, an increase of 1,013 over the 1954 total of 4,147. This increase, in the main, was made up of cases of measles. On the whole, the year was a good one from the point of view of the more serious diseases; the incidence of poliomyelitis, meningitis and the enteric group of diseases being low, but a disturbing feature was the increase to 17 of confirmed cases of diphtheria, the highest number of cases confirmed in the City since 1948.

Table XXXV shows the actual number of notifications and the rate per thousand for the main notifiable infectious diseases for the years 1954 and 1955:

# CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1955

1.



TABLE XXXV

<i>Disease</i>	<i>No. of corrected notifications, 1955</i>	<i>Rate per 1,000</i>	
		1955	1954
Smallpox	—	—	—
Scarlet Fever	273	0.91	1.75
Diphtheria	17	0.056	0.00
Typhoid Fever	—	—	—
Paratyphoid Fever	7	0.00	0.00
Meningococcal infection	7	0.00	0.06
Erysipelas	22	0.07	0.11
Measles	3,525	11.75	6.73
Whooping Cough	407	1.31	2.71
Pneumonia	454	1.51	1.67
Acute Poliomyelitis			
Paralytic	18	0.06	0.14
non-Paralytic	—	—	.01
Food poisoning	10	0.03	0.00
*Puerperal Pyrexia	115	23.26	14.66

\* Attack rate per 1,000 live and still births.

*Diphtheria.* Until 1954 no confirmed case of diphtheria had occurred in Hull since 1950, but in August of that year a child died from an illness diagnosed post-mortem as diphtheria. On January 3rd, 1955, a young woman was admitted to Castle Hill Hospital with a sore throat and a throat swab subsequently proved to be positive for diphtheria. On January 4th another case was notified and a further 3 cases were then notified during the month of January. Six cases occurred in February, and a further 6 cases occurred at varying times during March, April and May. No cases were then notified until November, when a child aged 3 years was admitted to hospital as a possible case of diphtheria. This was subsequently proven and the child died from the disease in hospital.

As soon as the first cases were notified, routine throat swabs were taken from the immediate contacts, but following on the incidence of more than one case in the Villa Place area, routine nose and throat swabs were taken from the neighbourhood and school contacts of the children. Altogether during the year 695 contacts were swabbed and as a result 2 cases were discovered that might otherwise have remained undetected.

The majority of cases occurred in the region of the Villa Place school and occurred in children of school age. The actual age and sex distribution of the cases is as follows:

	<i>Male</i>	<i>Female</i>
0-1 years	—	—
1-5 „	—	4
5-10 „	3	5
10-15 „	3	—
15-25 „	—	1
25+ „	—	1

Sixteen of the 17 cases were admitted to Castle Hill Hospital and of these 12 cases were mild or moderately severe, but 3 cases were severe with complications and a further case died.

Of the cases, 11 had not been immunised and 6 completely or partly immunised. Of the 6, however, only one had been immunised more recently than 1951 and only one became severely ill. The child who died had not been immunised. All except one of the cases were due to the mitis type of organism, the one remaining case being due to an organism of the gravis type.

In addition to routine contact swabbing, the Immunisation Van was sent to the area mainly affected on 3 occasions in order to try to encourage immunisation, but unfortunately the results obtained were disappointing.

In addition to the 17 cases, 4 persons were discovered to be harbouring non-virulent organisms in their throat. These were admitted to Castle Hill Hospital until virulence tests had shown them not to be dangerous and they were discharged.

Twenty other notifications of diphtheria were received during the year but these were subsequently corrected to 15 cases of tonsillitis, 2 tracheitis, 1 pneumonia, 1 glandular fever and one was undiagnosed because he took his discharge from hospital.

TABLE XXXVI.

Year	Notifications received	Diagnosis confirmed	Attack-rate per 1,000 population	Deaths	Death-rate per 1,000 population	Case mortality per 100 cases
1946	194	102	0.37	2	0.007	1.96
1947	86	30	0.10	—	—	—
1948	82	24	0.08	—	—	—
1949	38	2	0.00	—	—	—
1950	25	4	0.00	—	—	—
1951	16	—	—	—	—	—
1952	11	—	—	—	—	—
1953	5	—	—	—	—	—
1954	17	1	0.00	1	0.003	100.00
1955	41	17	0.06	1	0.003	5.9

*Scarlet Fever.* There was again a decrease in the number of cases notified, notifications totalling 273 in 1955 compared with 526 and 766 in 1954 and 1953 respectively. As a result of change in diagnosis the number of 273 was subsequently corrected to 267.

The distribution of notifications over the year was 66, 56, 32 and 119 respectively in the first, second, third and fourth quarters. The disease continues to be of a very mild character and its very mildness might assist its dissemination as parents are often disinclined to provide effective isolation because of the slight constitutional disturbance.

Fifty-seven cases, or 20.9% of notified cases, were admitted to various Infectious Diseases Hospitals, mostly because of social conditions at home rather than because of the severity of the disease itself. There were 13 secondary cases, i.e. cases occurring in a family within 4 weeks of the onset of a previous case, and one return case, i.e. a case occurring within 4 weeks of the return home from hospital of a patient who had been treated there for Scarlet Fever.

There were no deaths directly attributable to Scarlet Fever.

*Measles.* 3,525 cases of measles were notified during the year. The majority of cases were notified during the first two quarters, the figures for the first, second, third and fourth quarters being 1,759, 1,467, 278 and 21 respectively. The epidemic was a carry over from the last two months of 1954 when, as stated in the previous Annual Report, 711 cases were notified. The true extent of the epidemic has thus been somewhat masked by the statistical division between the two years.

The disease has again been mild; 45 cases were admitted to Infectious Diseases Hospitals and one death was recorded.

*Whooping Cough.* 418 cases of whooping cough were notified in 1955 compared with 815 in 1954 and 1,000 in 1953. The incidence in 1954 had been the lowest since 1947, and the figures for 1955 are the lowest since 1939.

The disease has therefore shown some departure from its normal biennial incidence perhaps due to the inoculation campaign against whooping cough instituted in June, 1953, although it is of course as yet too early to be certain of this.

One death only was attributed to whooping cough during the year.

*Enteric Fever.* There were no cases of typhoid fever in the City during the year. Four cases of Para-typhoid B. were notified and the corrected notifications amounted to seven. Four of the cases occurred in the Victoria Hospital for Sick Children following on the admission of a child with P.U.O. The ward in question was closed as soon as the nature of the illness became known and active measures then instituted by the hospital staff in conjunction with the Health Department limited the spread to a further 3 cases only. In view of the difficulties of control inherent in an open children's ward of the type in which the case occurred, the limitation to this number was satisfactory.

Two further cases also occurred in two seamen admitted to hospital from a ship lying in the docks. The men were admitted as possible cases of appendicitis but when the nature of the disease was apparent they were transferred to Castle Hill Hospital and the ward closed and kept under surveillance. Fortunately no further case occurred.

*Gastro-Enteritis.* Gastro-enteritis is voluntarily notifiable in Hull. 233 notifications were received during the year but this figure was subsequently corrected to 219.

142 of the notifications of gastro-enteritis were for children up to the age of 1 year, and amongst these 81 were for boys and 61 for girls. Between the ages of 1 and 2 years there were 20 notifications and between 2 and 5 years there were 40 cases. 10 cases occurred in adults over 15 years.

The following table shows the spread of notifications over the year and is contrasted with similar notifications for dysentery:

	<i>Jan.</i>	<i>Feb.</i>	<i>Mar.</i>	<i>Apl.</i>	<i>May</i>	<i>June</i>	<i>July</i>	<i>Aug.</i>	<i>Sept.</i>	<i>Oct.</i>	<i>Nov.</i>	<i>Dec.</i>
Gastro-												
Enteritis	12	15	19	13	11	21	10	24	29	33	29	17
Dysentery	5	7	19	18	26	33	20	14	17	15	2	3

This shows the peak incidence for gastro-enteritis in September, October and November in contrast with the peak for dysentery which occurred earlier in the year in May and June.

*Acute Poliomyelitis.* There were 18 confirmed cases of poliomyelitis during the year as compared to 45 in 1954. All 18 were paralytic cases and all were treated in hospital except one. There was only one death due to the disease, this being a case that died on the way to hospital.

The disease occurred sporadically throughout the year and was not confined to any particular part of the City.

In one family two cases occurred, the first case occurring in a young boy, followed after an interval by the mother contracting the disease. The family attributed the boy's illness to falling in one of the open agricultural drains.

*Meningococcal Infection.* Seven cases were notified during the year. All the cases were admitted to hospital, 3 to Castle Hill and 4 to other hospitals.

Two deaths from meningococcal infection were registered.

*Dysentery.* 179 cases were notified during the year, this number being subsequently corrected to 218. The majority of cases were due to *Shigella Sonne*. 29 proven cases of *Sonne Dysentery* occurred amongst children attending the new Buckingham Street School between the end of January and the beginning of April. The majority of cases occurred in the form of an explosive outbreak about the 18th February amongst children in the Buckingham Street Nursery, when some 24 children were absent from school because of diarrhoea. Faecal samples were taken from these and subsequent cases of diarrhoea with a result that 29 children were found to be harbouring the organism.

At the time all children who were absent from school were followed up by the Sanitary Inspector. Cases proved to be positive were treated by their general practitioner and further faecal samples were examined after completion of treatment.

As a result of these measures and the institution of strict hygienic precautions at the school, the outbreak was brought under control and had completely subsided by the Easter holidays.

*Food poisoning.* Nine notifications of cases of food poisoning were received during the year and this was subsequently corrected to 10. These figures, of course, do not represent anything like the true number of cases of food poisoning occurring in the year. Many cases, because of the mildness of the symptoms, are probably notified neither to the Health Department nor to the family practitioner.

The Department became aware of several outbreaks of food poisoning in the City during the course of the year, details of the more interesting being given below.

(a) A coach load of people visited Blackpool for the illuminations. They had a meal at an hotel in Blackpool and on the way home nearly all the members of the party became ill. Two girls in the party and the driver of the bus, who did not eat the meal at the hotel did not, however, develop any illness. The bus stopped at the Hull Royal Infirmary on its return and the cases were treated there. Samples of faeces and vomit showed heat resistant *clostridium welchii* to be present.

(b) Following on a notification of dysentery it was found that 3 people from a family of 4 had been taken ill with symptoms resembling food poisoning. A subsequent bacteriological report was positive for salmonella St. Paul. On investigation it was ascertained that the 3 affected members had eaten a pork pie obtained from a local shop. The staff of the shop at which the pies were manufactured were examined and 3 were found to be excreting salmonella St. Paul.

At approximately the same time a child aged 5 years was admitted to the Infectious Diseases Hospital suffering from gastro-enteritis and she also was found to be suffering from salmonella St. Paul. In this case a history of the consumption of beef sausages purchased at the same shop was obtained. On investigation it was found that the brother of the girl was also excreting the organisms although he had been symptomless.

At about the same time a 2 year old child was also found to be excreting salmonella St. Paul but no connection between this and the other cases could be found.

(c) The Health Department were notified of a case of dysentery but on investigation it was found that two members of the family were suffering from food poisoning. The organisms isolated were salmonella typhi-murium, and it was



ascertained that the only common food eaten likely to have caused infection was a duck egg. There would seem to be little doubt that the cases had been caused by this.

*Influenza.* There was no undue incidence of influenza during the year, although there were 11 deaths attributable to this disease.

*Pneumonia.* 537 cases of pneumonia were notified during the year, including 22 acute influenzal and 515 acute primary. 394 of the cases were admitted to Castle Hill Hospital. There were 37 deaths amongst the cases notified.

*Malaria.* 3 cases of malaria were notified during the year, this figure subsequently being corrected to 4. All cases were investigated and in every case the disease was thought to have been contracted abroad.

*Smallpox.* No case of smallpox was notified.

*Weil's Disease.* One case of Weil's disease was notified in a school girl who died of the disease. In spite of investigation no apparent source was discovered for the illness.

*Infectious Hepatitis.* 28 cases of infectious hepatitis were voluntarily notified to the Health Department and 3 deaths were registered from this disease. Of the cases notified 19 were admitted to hospital. 12 of these cases occurred in children of school age, 6 in children under 5 years and 10 were adults.

*Medical Examination of Suspected Infectious Cases.* The services of medical officers of the Health Department continued to be available to general practitioners to assist in the diagnosis of any doubtful case of suspected infectious disease. During the year 62 such visits were made.

*Acute Rheumatism Regulations.* These Regulations make notifiable any case of Acute Rheumatism, as defined by the Regulations, in a person under 16 years of age.

During 1955, 11 cases were notified according to the Regulations.

During the year 1173 residents of the City were admitted to Infectious Diseases Hospitals. This figure showed a very slight increase on the 1954 total of 1143.

The following table gives details of cases of infectious diseases admitted to hospital in 1955:

TABLE XXXVII

	Admitted Castle Hill Infectious Diseases Hospital 1955	Admitted other Infectious Diseases Hospitals 1955	Total 1955	Total 1954
Scarlet fever	57	46	103	205
Diphtheria	16	—	16	14
Acute Poliomyelitis	17	—	17	45
Meningococcal infection	3	—	3	5
Whooping cough	37	2	39	31
Measles	36	8	44	35
Pneumonia	394	1	395	349
Dysentery	32	—	32	21
Other diseases	446	3	449	438
	1,038	60	1,098	1,143

*Bacteriological Examinations.* Bacteriological work in connection with infectious diseases was carried out by the Public Health Laboratory Service at the laboratory in the City.

The following are the details of the work carried out during the year:

Faeces	1,499	Throat Swabs	1,040
Nasal Swabs	842	Other	145

*Disinfecting Station.* Because of the decrease in the incidence of infectious diseases, particularly of the more serious ones, and of skin diseases such as scabies, the number of articles disinfected at the Disinfecting Station continues to decline. In 1955 the number of articles of bedding, etc., as well as the number of houses disinfected was probably the lowest ever.

The following table shows the figures obtained over the last 20 years:

<i>Year</i>	<i>Articles of Bedding etc.</i>	<i>Houses</i>	<i>Library Books</i>	<i>Baths</i>
1955	18,317	617	474	281
1954	21,314	885	605	167
1953	22,870	1,077	772	256
1952	18,466	744	574	224
1951	26,188	691	466	200
1950	23,187	867	742	225
1949	22,930	751	728	313
1948	28,849	1,098	884	113
1947	34,542	1,091	978	417
1946	33,128	944	900	1,167
1945	48,865	906	713	1,307
1944	54,317	998	888	1,989
1943	68,207	1,157	1,141	6,265
1942	152,607	2,688	1,046	3,668
1941	161,725	1,826	677	11,040
1940	135,221	1,704	674	10,580
1939	117,701	1,983	815	8,064
1938	121,362	2,264	1,008	7,750
1937	110,213	2,438	1,316	6,389
1936	102,031	2,740	2,338	5,232

In addition to normal disinfection 281 baths were given during the year. 208 verminous persons were deloused and 36 midwives who had been in contact with infectious disease had baths and their clothing disinfected.

With improvement in social conditions consequent upon the development of new housing and slum clearance, and should the present trends in infectious disease continue, the needs for disinfection services will probably continue to get less and it might ultimately prove possible to do away with these services altogether. It is probably, however, necessary to retain them at the moment against the eventuality of such things as a smallpox outbreak or the return to virulence of one of the diseases such as scarlet fever which is at present in a mild form.

## TUBERCULOSIS

*Incidence and Mortality.* In the following table are given new cases and deaths arranged in age periods, respiratory and non-respiratory figures being shown separately.

### TABLE XXXVIII

NEW CASES AND MORTALITY

Age Periods	NEW CASES*						DEATHS					
	Respiratory		Non-Respiratory		Totals		Respiratory		Non-Respiratory		Totals	
	M.	F.	M.	F.	1955	1954	M.	F.	M.	F.	1955	1954
0- 1	4	1	—	—	5	3	—	—	1	—	1	—
1- 5	7	2	3	2	14	19	—	1	—	—	1	—
5-10	13	2	1	2	18	12	—	—	—	—	—	1
10-15	4	11	1	3	19	15	—	—	—	—	—	—
15-20	22	25	1	3	51	33	—	1	—	—	1	—
20-25	12	26	—	1	39	53	—	—	1	—	1	2
25-35	20	41	1	3	65	76	5	9	—	—	14	14
35-45	28	14	—	1	43	50	6	4	—	—	10	12
45-55	19	6	1	—	26	48	9	2	1	—	12	14
55-65	25	8	—	2	35	44	6	—	—	—	6	22
65 and over	14	2	1	1	18	26	12	1	1	—	14	15
1955	168	138	9	18	333	—	38	18	4	—	60	—
1954	194	152	14	19	—	379	51	24	6	—	—	81

\* Primary notifications and other new cases coming to the knowledge of the Medical Officer of Health.

*Death-rates.* The death-rate per 1,000 of the population from respiratory tuberculosis was 0·19 and from non-respiratory disease 0·013, giving a total death-rate of 0·20 for all forms of tuberculosis.

TABLE XXXIX.

Year	Deaths in Kingston upon Hull			Death-rate per 1,000 Population	
	Respiratory	Non-Respiratory	Total	Kingston upon Hull	England and Wales
1905	251	92	343	1·33	1·64
1915	367	117	484	1·66	1·44
1925	314	62	376	1·26	1·02
1935	244	61	305	0·95	0·71
1945	188	40	228	0·93	0·62
1951	93	7	100	0·34	0·31
1952	87	7	94	0·31	0·24
1953	74	13	87	0·29	0·20
1954	75	6	81	0·27	0·18
1955	56	4	60	0·20	*0·17

\*Provisional

*Tuberculous Meningitis.* During 1955 there were no deaths in which tuberculous meningitis was certified to be the principal cause.

*Notifications.* The following table shows the total number of new cases brought to light during the last 5 years.

TABLE XL

YEAR	NEW CASES				TOTAL NEW CASES
	From Primary Notifications		On Information from Other Sources		
	Respiratory	Non- Respiratory	Respiratory	Non- Respiratory	
1951 .....	271	34	48	9	362
1952 ....	262	36	36	6	340
1953 ..	328	37	18	4	387
1954	326	30	20	3	379
1955 .....	296	26	10	1	333

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952—SUMMARY OF NOTIFICATIONS

FORMAL NOTIFICATIONS												
Age Periods	NUMBER OF PRIMARY NOTIFICATIONS OF NEW CASES										Total Notifications (i.e., including cases previously notified by other doctors)	
	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65		65 and up- wards
Respiratory—												
Males ....	3	7	13	4	22	12	20	28	18	24	10	161
Females ....	1	2	2	11	25	26	40	13	5	8	2	135
Non-Respiratory—												
Males ....	—	3	1	1	1	—	1	—	1	—	—	8
Females ....	—	2	2	3	3	1	3	1	—	2	1	18
Total	4	14	18	19	51	39	64	42	24	34	13	322
												401

SUPPLEMENTAL RETURN

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period from the 1st January to the 31st December, 1955, otherwise than by formal notification.

Age Periods	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 and upwards	Total Cases
Respiratory—												
Males ...	1	—	—	—	—	—	—	—	1	1	4	7
Females ...	—	—	—	—	—	—	1	1	1	—	—	3
Non-Respiratory—												
Males ...	—	—	—	—	—	—	—	—	—	—	1	1
Females ...	—	—	—	—	—	—	—	—	—	—	—	—
Total	1	—	—	—	—	—	1	1	2	1	5	11

SOURCE OF INFORMATION		No. OF CASES	
		Respiratory	Non-Respiratory
Death Returns { Posthumous Notifications	From Local Registrars	...	...
	Transferable Deaths from Registrar General	...	...
	...	...	...
	...	...	...
		10	1



*Examination of Contacts.* The following table shows the number of new contacts examined by the Medical Officers of the Chest Clinics during 1955 and previous years :—

<i>Year</i>						<i>No. of Contacts</i>
1951	....	....	....	....	....	522
1952	....	....	....	....	....	583
1953	....	....	....	....	....	649
1954	....	....	....	....	....	588
1955	....	....	....	....	....	596

Of the 596 contacts in 1955, 2 were found to be definitely tuberculous at the first examination and 16 were diagnosed later ; 80 were considered to be non-tuberculous at the first examination and 497 subsequently ; none were under observation at the end of the year. Thus, 3·2% of family contacts were found to be tuberculous either at the initial examination or within a short period of observation.

*Chest Clinics.* The Hull (B) Group Hospital Management Committee maintains two Chest Clinics in the City to deal with patients resident within Kingston upon Hull and the adjacent area of the East Riding. So far as Hull is concerned, the Local Authority's Tuberculosis Health Visitors are based at the Chest Clinics and work under the direction of the Consultant Chest Physician.

The following details for 1955 and previous years relate only to Hull patients under the care of the Chest Clinics :—

TABLE XLII.

<i>Year</i>	Number of Cases on Register 31st December	Examinations	Total Home Visits by T.B. Health Visitors
1951	1,545	8,258	9,450
1952	1,596	8,776	8,536
1953	1,724	9,009	9,042
1954	1,790	8,961	8,735
1955	1,800	8,805	8,201

*Isolation of Infectious Cases.* The Public Health Act, 1936, Section 172, provides for the compulsory removal to hospital of infectious cases of pulmonary tuberculosis who cannot be isolated properly at home. No legal action has been necessary under this section.

*Mass Radiography.* In 1955 the Hull Unit (20 of the three Regional M.M.R. Units) worked in the East and North Ridings, York and Hull. The medical work was shared by the 4 doctors on the Chest Clinic staff, under the direction of the Consultant Chest Physician.

The Unit was based at the ex-Hull and Sculcoates Dispensary premises, Baker Street, from January to April, when it moved into the East Riding and then to the North Riding and York areas, returning to Hull each weekend and permanently again in November and December.

Of the 51,676 persons x-rayed by the Unit during the year, 27,474 persons were domiciled in Hull and were composed of the following groups:

Mental Patients	788
Hospital Management Committee Nursing and other Staffs	900
School Children	3,664
Training College Students	334
University College—Students and Staff	802
The Blind Institute	118
Government Training Centre and "Remploy"	65
Merchant Navy Personnel	59
Chest Clinic Contacts	578
Ante-Natal Sessions	1,311
General Practitioners' Sessions	1,070
Hull Corporation Employees	477
Government Departments and Nationalised Industries	3,558
Industrial Groups	10,620
Public Sessions	3,130
Total	<hr/> 27,474 <hr/>

General Practitioners' sessions continued to provide an excellent means of case-finding, the number of cases of active pulmonary tuberculosis found representing a rate per thousand 9 or 10 times higher than that found in routine surveys of the general population.

It is thought that Hull should have a static unit based in the City throughout the whole year. More time could thereby be spent in examination of selected industrial and other groups.

A meeting was held with the Regional Organiser of the Leeds Regional Hospital Board concerning the winter programme when it was agreed to carry out surveys on the North Hull and Bilton Grange Estates. It was also decided to extend the Mass Miniature Radiography Service to merchant seamen and sub-

sequently arrangements were made to effect this in co-operation with the Shipping Federation. Special sessions were also arranged for patients of general medical practitioners, and for ante-natal cases, in addition to public sessions. It was further agreed that following the B.C.G. vaccination scheme for 1956, only tuberculin positive 13 year old school children would be X-rayed. Subsequently it was decided to carry out a mass miniature radiography survey of the contacts of tuberculin positive school children, and this will be done in March, 1956. The survey on the North Hull estate was carried out in December and gave the following results:

Number of persons examined—

	<i>Miniature Film</i>	<i>Large Film</i>
Male . . .	189	5
Females . . .	306	14
	—	—
	495	19
	—	—

Results of the Survey:

- 1 referred to the Chest Clinic—possibly inactive post-primary pulmonary tuberculosis;
- 2 referred to the Chest Clinic—non-tuberculous abnormality of the chest;
- 1 referred to the General Practitioner concerned—inactive post-primary pulmonary tuberculosis;
- 1 referred to the General Practitioner concerned—heart lesion;
- 1 inactive post-primary pulmonary tuberculosis—no action required;
- 4 non-tuberculous chest abnormalities—no action required;
- 6 no significant abnormality discovered—no action required.

*X-ray Work.* Arrangements continued to be made for the X-ray examination of staff working in contact with organised groups of children and of all new entrants to the Corporation's Superannuation Fund and to the Police Force and Fire Brigade. 366 examinations were carried out under the "Protection of Children" scheme and 731 examinations were made of other staff, the cost of the latter being refunded by the Committees concerned.

1,097 X-rays were examined by medical officers of this Department, and in a few instances the Chest Physician was referred to for his opinion regarding the films, whilst a radiologist's opinion was obtained in some cases where the films showed unusual features.

*Domiciliary Treatment of Tuberculosis.* During 1955, several patients were visited for the giving of 'refills', sometimes for as long as six months at weekly or fortnightly intervals, or until the patient could attend or be brought by car to the pneumothorax clinic when the acute phase of the illness had terminated.

As well as domiciliary 'collapse' treatment, mention must be made of the invaluable work done by the Home Nursing Service whose nurses visit, on a doctor's request, those home-bound tuberculous patients who need injections of antibiotic drugs. In the past year or two many hundreds of domiciliary visits have been carried out by the nurses for this purpose alone; at any one time some 30 to 50 patients in the City are under current treatment of this kind in their own homes, the minimum course consisting of daily injections over a period of six weeks.

*Sanatoria Admissions and Waiting Lists.* In 1955, 282 Hull patients were admitted for treatment to Tuberculosis Sanatoria or Hospitals. At the end of the year 8 women and 17 men were on the waiting list for admission.

The Sub-Regional bed-bureau, conducted at the Coltman Street Clinic, arranges all admissions of tuberculous patients domiciled in the East Riding, York and parts of the West and North Riding areas, as well as in Hull. The bed-bureau has access to 432 beds (approximately) for the treatment of tuberculosis, 370 being in the relatively nearby county area or in Hull. Since the last report the number of patients awaiting admission has very much decreased, which is the present trend throughout the country, and the day-to-day waiting list contains the names of 40-50 patients. Emergency cases, either on medical or social grounds, can be admitted almost immediately.

*Rehabilitation—Special Remploy Factory.* This factory continued with success its work of rehabilitation during 1955, the number of men and women working on the 31st December remaining at approximately 100. Since the Factory opened in February, 1949, 200 workers have been employed, some temporarily, later passing on to other work or vocational training outside.

During the year, the health of the workers was satisfactory on the whole, the relapse rate was not excessive, while morale and team-spirit were on a high level, as in previous years.

#### B.C.G. VACCINATION AGAINST TUBERCULOSIS

At the end of 1954 there were still about 500 school children who had been unable to take part in the B.C.G. Scheme that year owing to an influenza epidemic or for other reasons. Early in January, further nominal rolls and a programme were prepared and during January and February 435 of these children were tuberculin tested. Of the 434 cases where the reaction was ascertained 28·80% were found to give a positive result. Of the 309 tuberculin negative cases, 282 were vaccinated, and post-vaccination testing showed a conversion rate of 98·4% as against 95·9% in the children who were done during 1954.

Mass Miniature Radiography was offered to all the children in the 13 and 14 year age groups, and the findings were as follows:

(1) Total number of boys examined	1,894
(2) Total number of girls examined	1,763
(3) Total recalled for large films	40
(4) Results:	
1 Boy, ? active primary tuberculosis, later shown to be inactive;	
2 Girls, bilateral apical tuberculous infiltration of uncertain activity;	
6 Scholars, inactive primary tuberculosis;	
1 Scholar, dextro-cardia;	
15 Scholars, other abnormalities;	
15 Scholars, no significant abnormality—no action.	

The procedure followed in our second scheme commencing in September, 1955 was very similar to that of the previous year, but on this occasion the literature and consent forms were distributed to parents through the schools, the School Nurses following up the cases from whom no replies were received.

Following the experience in 1954, it was decided that, in view of the high conversion rate following B.C.G. vaccination, the post-vaccination tuberculin test was superfluous. In a follow up of the 1954/55 series it had been found that conversion following vaccination could be related to the size of the scar; those with a scar of less than 4 m.m. showed a conversion rate of 39% while above 4 m.m. the conversion rate rose sharply to about 95% or more.

The schools re-opened on the 6th September following the summer holidays, the scheme being started on the 30th September and completed on the 16th December.

On the whole the programme went more smoothly in 1955 with fewer doctors taking part and completing the tests and vaccinations in far fewer sessions than in the previous year. In addition, the Heaf Multiple Puncture method of tuberculin testing was introduced which enabled tuberculin testing of a larger number of children per session and, as will be seen below, appeared to give a more satisfactory result than the Mantoux Test in which the personal error may be increased by variation of the depth of injection and quantity injected. In addition to the advantage of speed and consistency of the Heaf Test, the children were generally less apprehensive and in the majority of cases had no objection to being "shot" with the gun.

Approximately 275 children missed the vaccination through absenteeism, etc., and arrangements are being made for these to be dealt with early in 1956.

The result of the residue of cases from 1954 and for the new cases in 1955 are shown separately below.

*Results.* Table A shows the percentage of consents received for children residing in Kingston upon Hull and for non-resident children attending schools within the City. The continued high percentage of consents received is very gratifying.

Table B shows the results of tuberculin testing. An interesting feature again is the difference between the tuberculin positive rates for resident and non-resident children.

As was mentioned in my last report, following the conclusion of the B.C.G. vaccination programme for 1954-55 an enquiry was made with the object of elucidating any differences between two groups selected at random from among the tuberculin negative and tuberculin positive children prior to vaccination. The two groups showed comparable results as regards place of birth (born in Hull or otherwise), and numbers of residences and schools attended since birth. It was noted that over 30% had not been breast fed during infancy (tuberculin negative 30.91%, tuberculin positive 34.4%). An appreciable difference was found in the percentage figures for children who had dried milk during infancy (tuberculin negative 52.73%, tuberculin positive 38.53%) and those who had untreated milk in childhood (tuberculin negative 21.82%, tuberculin positive 32.11%). There was no significant difference between the two groups as regards previous illnesses.

The most obvious difference was found in the history of previous contact with tuberculosis, details of which are summarised below.

	<i>Tuberculin Negative</i>	<i>Tuberculin Positive</i>
Total in survey	110	218
Cases having tuberculous member in family	9 (.82%)	37 (.17%)
Cases in whose family one or more have died of tuberculosis	—	32 (.15%)
Other tuberculosis contacts	—	8 (.04%)

Table C gives details of the results obtained at each of the schools included in the scheme.

Table D gives an analysis of the results at different types of schools—grammar, primary, secondary modern, technical, special and voluntary schools.



Table E indicates the percentages of positive reactors in the various wards of the City. These figures have been included in the statistical ward map of the City. (inserted after page 172) as a point of interest. The Drypool ward still has the highest tuberculin positive rate  $40.63\%$  as compared with  $42.2\%$  in 1954. There appears to be a tendency towards an increase in the tuberculin positive rate towards the outskirts of the City, whilst there has been a decrease in almost all the wards towards the centre of the City, especially along the River Humber. The trend is possibly due to re-housing on the new estates, especially in the Sutton and Marfleet wards.

There were no abnormal reactions reported by the School Nurses.

I would like to express my appreciation of the help given by the Education Department, School Teachers, School Nurses, Medical Officers and others who took part in the scheme.

*Tuberculin jelly testing of infants.* Preliminary discussions took place regarding tuberculin testing of toddlers of two, three and four years of age, and it was decided that the scheme should come into operation in April, 1956. Children would be sent a birthday card at the second, third and fourth birthdays and enclosed would be a message from the Medical Officer of Health advising the parent to take the child to a clinic at which a full medical examination would be carried out and, in addition, any vaccination or immunising procedure would be done. In those cases giving a positive jelly test the result would be confirmed by the Heaf tuberculin test, and those still giving a positive reaction would be referred to the Consultant Chest Physician for further investigation and the follow-up of family contacts.

**TABLE A**  
B.C.G. SCHEME—1955

	Number on Roll		Number of Consents		Percentage of Consents	
	Boys	Girls	Boys	Girls	Boys	Girls
Kingston upon Hull ....	1,947	1,994	1,500	1,455	77.04	72.97
Non-resident ...	137	59	111	41	81.02	69.49
Total ...	2,084	2,053	1,611	1,496	77.30	72.87

**TABLE B**  
B.C.G. SCHEME—1955

	Number Tested		Number Positive		*Percentage Positive	
	Boys	Girls	Boys	Girls	Boys	Girls
Kingston upon Hull	1,377	1,308	373	331	27·09	25·31
Non-resident	103	38	34	14	33·01	36·84
Total	1,480	1,346	407	345	27·50	25·63

\* Percentage of positives of total number read.

<i>No. Mantoux Tested</i>	<i>No. Positive</i>	<i>Percentage Positive</i>	<i>No. Multiple Puncture Tested</i>	<i>No. Positive</i>	<i>Percentage Positive</i>
1,817	401	22·07	1,009	351	34·79

*Early 1955 being residue of cases from 1954*

<i>No. Tested</i>	<i>No. Positive</i>	<i>Percentage Positive</i>	<i>No. tested but not completed course</i>
435	125	28·80	28

TABLE C.

B.C.G. SCHEME—1955

School	No. on School Roll	No. of Consents	% of Consents	No. Tested and result known	No. Positive	% Positive	No. Negative	No. Vaccinated	Course not completed
Thoresby High	92	64	69.56	62	18	29.03	44	44	2
Pearson High (Newland Avenue)	42	30	71.43	29	5	17.24	24	24	1
High School for Commerce	62	50	80.64	45	10	22.22	35	35	5
Northumberland Avenue Special	32	24	75.00	17	2	11.76	15	15	7
St. Mary's Grammar	57	33	57.89	30	8	26.67	22	22	3
Anthorpe High	173	132	76.30	124	33	26.61	91	90	9
Partially Sighted	5	4	80.00	4	3	75.00	1	1	—
Barham High	87	70	80.46	64	15	23.44	49	49	6
St. Gregory's	22	17	77.27	16	10	62.50	6	6	1
St. Patrick's	20	18	9.01	12	1	8.33	11	11	6
Newland C. of E.	28	12	42.86	10	—	—	10	10	2
St. Charles	29	25	86.21	21	6	28.57	15	15	4
High School for Building	51	39	76.47	36	6	16.67	30	30	3
Clifton Street	35	22	62.86	19	3	15.79	16	16	3
Willerforce High	100	69	69.00	62	15	24.19	47	47	7
Beverley Road	55	31	56.36	24	7	29.17	17	17	7
Fountain Road	79	57	72.15	50	6	12.00	44	44	7
Wayne High	65	43	66.15	36	9	25.00	27	27	7
Sir Henry Cooper	55	38	69.9	34	4	11.76	30	30	4
Welton High	122	79	64.75	76	28	36.84	48	48	3
Riley High	143	117	81.82	10	32	29.49	78	78	7
High School for Art and Crafts	35	22	62.86	22	5	22.73	17	17	—
Grammar School	123	95	77.23	92	28	30.43	64	62	5
Endike High	83	60	72.29	55	13	23.64	42	50	5
Fifth Avenue High	123	71	57.72	66	16	24.24	50	50	5
Newland High	100	69	69.00	62	11	17.74	51	49	9
Cottingham Road Special	20	9	45.00	4	2	50.00	2	2	5
Park Avenue Special	3	3	100.00	2	1	50.00	1	1	1
St. Vincent's R.C.	20	18	90.00	16	4	25.00	12	12	2
Lincoln Street	25	19	76.00	18	1	5.56	17	17	1
Marist College	67	47	70.15	43	11	25.58	32	32	4

Charterhouse High	48	39	81.25	31	6	19.35	25	25	8
Francis Askew High	140	107	76.43	83	14	16.87	69	67	26
Hymers College	73	64	87.67	60	27	45.00	33	33	4
Westbourne Street	77	65	84.41	53	16	30.19	37	36	13
St. Andrew's High	59	46	77.97	43	9	20.93	34	34	3
Kingston High	122	97	79.51	91	34	37.36	57	57	6
Eastfield High	103	71	68.93	63	14	22.22	49	45	12
Newington High	74	65	87.84	61	9	14.75	52	50	6
Paisley Street	44	32	72.73	31	6	19.35	25	25	1
St. Wilfrid's	33	22	66.67	20	6	30.00	14	13	3
Constable Street	81	65	80.25	57	13	22.81	44	44	8
Sidmouth County High (Sidmouth Street)	54	37	68.52	32	11	34.38	21	21	5
Nautical College	36	32	89.89	31	7	22.58	24	24	1
Chiltern Street	55	42	76.36	40	13	32.50	27	26	3
St. George's Road	24	20	83.33	16	4	25.00	12	12	4
Somerset Street	60	40	66.67	38	1	2.63	37	37	2
Malet Lambert	126	98	77.78	95	43	45.27	52	52	3
Maybury High	164	134	81.71	131	50	38.17	81	81	3
Mersey High	108	86	79.63	80	10	12.50	70	70	6
Chapman Street	62	38	61.29	33	10	30.30	23	23	5
Sutton C. of E.	10	9	90.00	9	6	66.67	3	3	—
Sutton Deaf	2	2	100.00	2	1	50.00	1	1	—
Estcourt High	96	76	79.17	72	28	38.89	44	44	4
Flinton High	122	96	78.69	93	26	27.96	67	67	3
Craven High	158	130	82.28	111	46	41.44	65	65	19
Buckingham Street	53	44	83.02	40	6	15.00	34	34	4
Courney Street	56	44	78.57	39	9	23.08	30	30	5
St. Mary's R.C., Wilton Street	62	49	79.03	43	9	20.93	34	33	7
Southcoates High	82	70	85.37	67	5	7.46	62	62	3
Totals	4,137	3,107	75.10	2,826	752	26.61	2,074	2,057	298
Less Non-Residents	196	152	77.55	141	48	34.04	93	93	11
Residents of Kingston upon Hull	3,941	2,955	74.98	2,685	704	26.22	1,981	1,964	287

TABLE D

B.C.G. SCHEME—1955

Type of School			Negative	Positive	Percentage Positive
Secondary Modern	....	....	1,139	412	26·56
Primary	....	....	393	99	20·12
Grammar	....	....	311	162	34·25
Secondary Technical	....	....	106	28	20·90
Voluntary	....	....	105	42	28·57
Special	....	....	20	9	31·03
			<hr/> 2,074	<hr/> 752	<hr/> 26·61

TABLE E

B.C.G. SCHEME—1955

KNOWN RESULTS OF PRELIMINARY MANTOUX TESTS BY WARDS

Ward			Total	Negative	Positive	Percentage Positive
North Newington	....		138	114	24	17·39
South Newington	....		133	105	28	21·05
Coltman	....	....	134	99	35	26·12
St. Andrews	....	....	104	77	27	25·96
Pickering	....	....	277	208	69	24·91
Albert	....	....	68	54	14	20·59
Botanic	....	....	84	57	27	32·14
Park	....	....	72	48	24	33·33
Newland	....	....	111	82	29	26·13
University	....	....	290	218	72	24·83
Myton	....	....	30	25	5	16·67
Paragon	....	....	27	19	8	29·63
West Central	....	....	87	69	18	20·69
East Central	....	....	75	56	19	25·33
Beverley	....	....	91	68	23	25·27
Alexandra	....	....	162	118	44	27·16
Drypool	....	....	64	38	26	40·63
Southcoates	....	....	115	89	26	22·61
Stoneferry	....	....	175	123	52	29·71
Sutton	....	....	288	199	89	30·90
Marfleet	....	....	160	115	45	28·13
Non-resident	....	....	141	93	48	34·04
			<hr/> 2,826	<hr/> 2,074	<hr/> 752	<hr/> 26·61



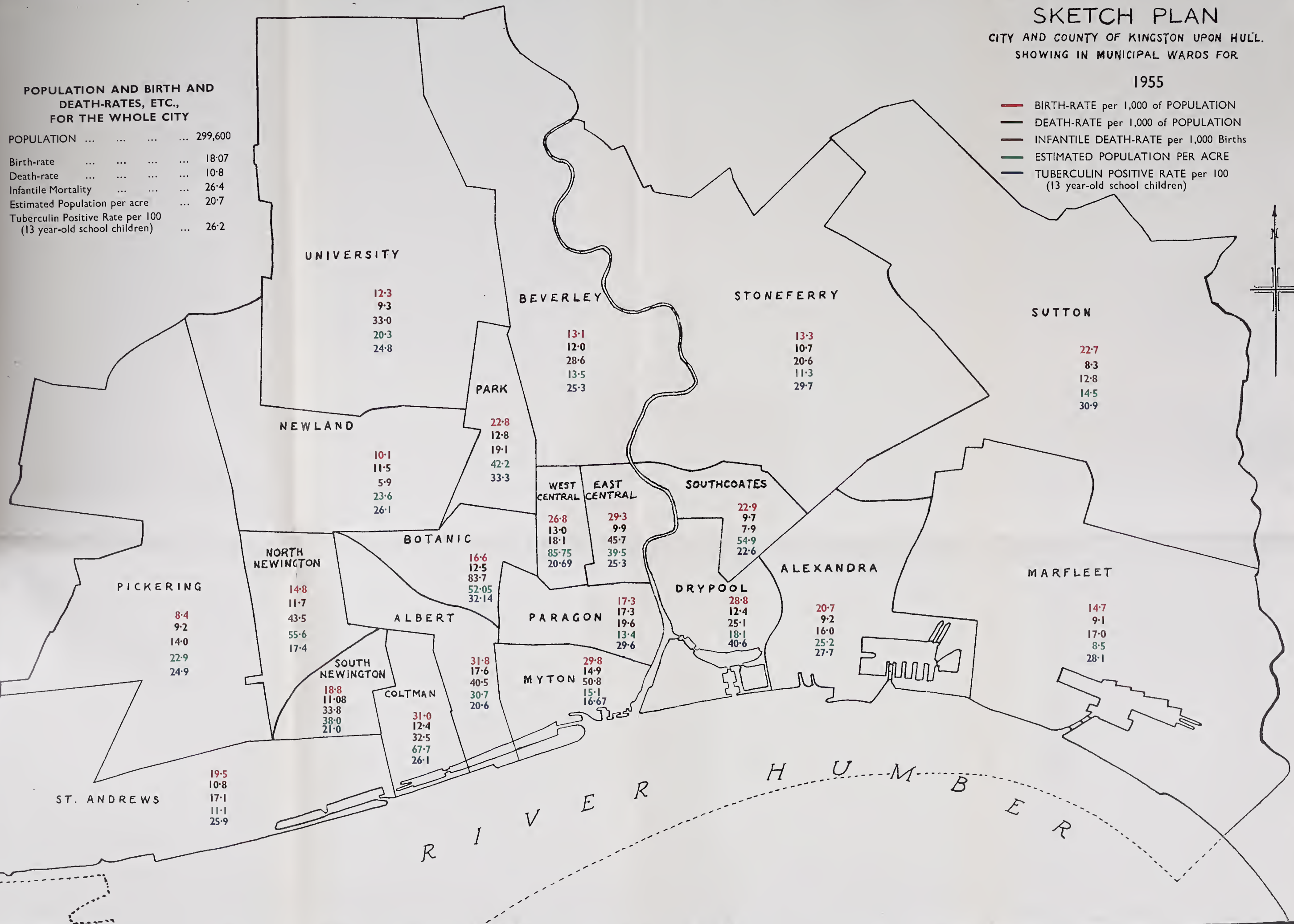
# SKETCH PLAN CITY AND COUNTY OF KINGSTON UPON HULL. SHOWING IN MUNICIPAL WARDS FOR

1955

## POPULATION AND BIRTH AND DEATH-RATES, ETC., FOR THE WHOLE CITY

POPULATION ... ..	299,600
Birth-rate ... ..	18.07
Death-rate ... ..	10.8
Infantile Mortality ... ..	26.4
Estimated Population per acre ... ..	20.7
Tuberculin Positive Rate per 100 (13 year-old school children) ... ..	26.2

- BIRTH-RATE per 1,000 of POPULATION
- DEATH-RATE per 1,000 of POPULATION
- INFANTILE DEATH-RATE per 1,000 Births
- ESTIMATED POPULATION PER ACRE
- TUBERCULIN POSITIVE RATE per 100  
(13 year-old school children)







# SCHOOL HEALTH SERVICE

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REPORT OF THE  
PRINCIPAL SCHOOL MEDICAL OFFICER  
FOR THE YEAR 1955

# KINGSTON UPON HULL EDUCATION COMMITTEE

---

*Chairman—*

Alderman D. C. LISTER, J.P.

*Deputy-Chairman—*

Councillor J. G. E. TESKEY-KING.

---

## **Schools Services Sub-Committee.**

*Chairman—*

Alderman F. HOLMES.

*Deputy-Chairman—*

Councillor J. G. E. TESKEY-KING.

Alderman J. LAWSON,

Alderman D. C. LISTER, J.P.

Councillor (Mrs.) E. BEECROFT.

Councillor (Mrs.) C. ELLIS.

Councillor S. FISHER.

Councillor W. HARGREAVES.

Councillor E. KIRKWOOD.

Councillor J. T. P. NOBLE.

Councillor J. W. SMITH.

Mr. T. F. BEECROFT.

Mrs. L. BELL.

Mr. F. O. DUNN.

The Rev. Canon F. HOPE SCOTT.

Mrs. C. L. OATES.

Mrs. A. THOMPSON.

Mrs. L. WALKER.

---

*Chief Education Officer—*

S. W. HOBSON, M.A.

# STAFF OF SCHOOL HEALTH SERVICE

## at 31st December, 1955

### Principal School Medical Officer

ALEXANDER HUTCHISON

### Deputy Principal School Medical Officer

ROWLAND GWYN DAVIES, M.D., D.P.H.

### Senior Medical Officer (School Health Service)

ALASTAIR M. R. CANN, M.D., M.R.C.S., L.R.C.P., D.C.H.

### School Medical Officers

JEAN M. BARROWMAN, M.B., Ch.B.

MARGARET M. BELL, M.B., B.Ch., D.C.H.

CHRISTINE N. R. CAMPBELL, M.B., Ch.B.

ELIZA J. CARSON, M.B., B.Ch., B.A.O.

MARY P. FLEMING, M.B., B.Ch., B.A.O., D.P.H., D.C.H., B.Sc.

SAMUEL KLINGER, M.D.

ISABEL M. McCULLOUGH, L.R.C.P. and S., D.C.H., D.R.C.O.G.

FRANCES W. MOYES, M.B., Ch.B.

JOSEPH TONG, L.M.S.S.A., C.P.H.

GEOFFREY R. WALKER, M.B., Ch.B., D.P.H., D.T.M.

KATHLEEN A. WILSON, M.B., Ch.B., B.A.O., L.M., D.P.H.

### Specialist Medical Officers (Services provided by Regional Hospital Board)

Cardiologists: J. W. BROWN, M.D., F.R.C.P.

D. C. MUIR, M.D., F.R.C.P.

Ophthalmologist: K. DEAN FOGGITT, M.B., Ch.B., D.O., D.O.M.S.

Orthopaedists: J. S. MAXWELL, M.B., Ch.B., F.R.C.S.

R. C. TATHAM, F.R.C.S.

Otologists: E. M. DEARN, M.B., Ch.B., D.L.O.

J. S. MARTIN, M.B., B.Ch., B.A.O., F.R.C.S., D.L.O.

R. R. SIMPSON, M.B., Ch.B., F.R.C.S.

Paediatrician: T. MORTON J. STEWART, M.D., D.C.H.

Psychiatrist: J. MACKAY, M.D., D.P.M.

### Principal School Dental Officer

JOHN C. CARR, L.D.S.

### Dental Officers

LLOYD B. WILSON, L.D.S.

ANNIE P. FARRELL, B.D.S.

Three Part-time Dental Officers

### Educational Psychologists

G. F. REED, M.A., A.B.Ps.S.

A. C. SMITH, M.A.

### Social Workers (Child Guidance)

Mrs. M. AITKEN, S.R.N.

Mrs. E. D. STRINGER, R.M.N.

### Speech Therapist

T. R. FRANCIS, L.C.S.T.

### Chiropodists

Three Part-time

### Nursing Staff

Superintendent: Mrs. E. T. BASS, S.R.N., S.C.M., H.V.

Nurses: Eighteen

### Park Avenue Special School Staff

Superintendent Physiotherapist: Miss M. R. K. JARRATT, M.C.S.P.

One Part-time Physiotherapist

### Orthopaedic Clinic Staff

Physiotherapist: Miss I. M. MATSON, M.C.S.P.

Dental Attendants: Five

Cleanliness Visitors: Two

### Clerical Staff

Senior Clerk: R. LAZENBY, D.P.A.

Clerks: Seventeen

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*To the Chairman and Members  
of the Education Committee.*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit the report upon the work of the School Health Service in the City and County of Kingston upon Hull for the year ended 31st December, 1955. The statistical tables have been prepared in the form approved by the Ministry of Education.

I am happy to report that the routine medical inspections are now up to date and that children commencing school are being examined within three months of entry. This is the first time for some years that I have been able to report such a satisfactory state of affairs.

During the year the new School Health Service premises were completed at Witham and the staff transferred from the old offices at New Cross Street to the brighter and more suitable accommodation provided, adjacent to the offices of the Maternity and Child Welfare Department.

Included in the Report is a note by Dr. Phillips on the B.C.G. campaign against tuberculosis. This proceeded much more quickly this year than in the previous year, owing to the campaign not being held up by any outbreaks of other infectious disease. I have to report that the Regional Hospital Board have intimated that from now on mass radiography facilities will not be available for school leavers and that the only children who will be X-rayed are those showing a positive Mantoux test.

Mr. Carr, the Principal School Dental Officer, still continues to work under difficulties due to shortage of staff. The Committee have authorised the appointment of a Dental Hygienist and this officer will be appointed in the New Year.

Aldwark Manor Special School has now been open for over a year. After the initial teething difficulties the school has settled down, and I wish to pay my sincere tribute to the excellent work done at the school by Mr. and Mrs. Lamb.

During the year a scheme was started whereby the Headmaster of the Deaf School holds clinics by appointment for the instruction of mothers and deaf children too young to attend school. These include children below the age of two years. This is a service much appreciated by the mothers and which will undoubtedly help the children.

The Child Guidance Clinic has been extended by furnishing and equipping an extra room. An additional social worker and an additional psychologist have been appointed.

Students undertaking various Courses at the University have been given the opportunity of visiting our clinics. This has been much appreciated by the students and by the University.

The Department continues to co-operate with the Joint Committee of the Institute of Child Health of the University of London, the Society of Medical Officers of Health, and the Population Investigation Committee in the National Survey on Health and Development of School Children. 43 home visits have been made to obtain information about the cases being followed up.

During the year Dr. Isabel McCullough sat for and passed her examination for the Diploma in Obstetrics of the Royal College of Obstetricians and Gynaecologists, and I should like to place on record my congratulations to her on her success. Dr. Margaret Bell obtained leave of absence for one year in order to study for her Diploma in Public Health. It is hoped that she will return to the Department in July, 1956.

The work of the Department has gone on successfully and efficiently, due to the untiring efforts of the staff to whom I tender my sincere thanks. The Chairman and the members of the Education Committee and the School Services Sub-Committee have, as always, taken a keen interest in the School Health Service. This fact is much appreciated by all the staff who welcome this interest.

Finally, I would like to thank Mr. S. W. Hobson, Chief Education Officer, who has always been ready to discuss various problems with me and whose help has been invaluable, and Dr. Cann who has been a tower of strength in the running of the Service.

I have the honour to be,

Your obedient Servant,

ALEXANDER HUTCHISON,

*Principal School Medical Officer.*

Health Department,  
Guildhall, Kingston upon Hull.  
March, 1956.

## CITY OF KINGSTON UPON HULL

## GENERAL STATISTICAL INFORMATION

	1955	1954
Population (estimated) ....	299,600	300,000
Maintained Primary and Secondary Schools—		
Number of Schools ....	93*	88
Number of Departments ....	167*	161
Number on Rolls ....	53,337*	52,364
Maintained Special Schools—(included in totals above)—		
Number of Schools ....	6*	5
Number on Rolls ....	611*	545

\* As at 14th January, 1955.

Cost of School Health Service—	1954-55	1953-54
Total Cost ....	£41,192	£34,804
Government Grant ....	£25,821	£21,878
Cost to Rates ....	£15,371	£12,926
Cost in terms of a Penny Rate ....	1.87d.	1.67d.

## SUMMARY OF WORK.

	1955	1954
A. Medical Officers at Schools, etc.—		
Periodic inspections at Primary, Secondary and Special Schools ....	15,791	19,163
Special inspections at Primary, Secondary and Special Schools ....	171	253
Re-inspections at Primary, Secondary and Special Schools ...	2,357	2,063
Inspections at Occupation Centre....	29	19
B. Medical Officers and Specialists at Clinics—		
Inspections at Clinics ....	10,736	10,747
Re-inspections at Clinics ....	14,952	14,019
Inspections under Employment of Children Bye-laws ....	964	930
Miscellaneous ....	423	480
C. Dental Officers—		
Inspections at Schools ....	9,623	2,824
Inspections at Clinics ....	5,954	6,416
Attendances for treatment ....	15,258	14,167
D. Nurses, Speech Therapists, Chiropodists, Physiotherapists, etc.—		
Visits to Schools ....	4,477	4,382
Examinations (including cleanliness inspections) in Schools	211,497	197,882
Visits to homes ....	22,242	26,382
Treatments of minor ailments in Clinics ....	82,051	79,420
Treatments of minor ailments at Special Schools ....	9,232	9,568
Treatments of orthopaedic defects in Clinics ....	1,116	1,182
Treatments of orthopaedic defects at Special Schools ....	2,942	2,501
Treatments of Speech Defects in Clinics ....	2,616	2,161
Treatments of Speech Defects at Special Schools ....	266	340
Treatments by Chiropodists ....	4,468	3,365
E. School Clinics—		
Grand total of inspections and treatments as detailed above	138,538	126,430

## I. STAFF

Details of the staff employed in the School Health Service on the 31st December, 1955, are to be found on page 175.

The number of sessions devoted by medical officers to work in the School Health Service was the equivalent of the service of approximately 5.3 whole-time school medical officers throughout the year.

The number of dental staff, which at the beginning of the year had been the equivalent of 4.0 whole-time dental officers, fell to the equivalent of 3.5 whole-time dental officers by the end of the year owing to one part-time dental officer leaving the city and to a reduction in the number of sessions which two other part-time dental officers were able to offer.

The following staff commenced duty:

<i>Name</i>	<i>Designation</i>	<i>Date</i>
Miss J. Whitehead	Clerk	3rd January, 1955
Mrs. M. C. Harrison	Clinic Attendant	21st January, 1955
Dr. P. Gabb	Medical Officer†	24th January, 1955
Mrs. M. Todd	Dental Attendant	1st April, 1955
Dr. R. G. Davies	Deputy Principal School Medical Officer	22nd April, 1955
Dr. I. M. McCullough	Medical Officer*	1st May, 1955
Mrs. M. E. Nightingale	Cleanliness Visitor	13th June, 1955
Mrs. E. D. Stringer	Social Worker	15th August, 1955
Mr. A. C. Smith	Educational Psychologist	1st September, 1955
Miss V. Hardey	School Nurse	5th September, 1955
Dr. P. Gabb	Medical Officer†	4th October, 1955
Dr. T. W. Sherratt	Medical Officer†	6th December, 1955

\* Resumed after leave of absence.

† Temporary.

The following staff ceased duty:

<i>Name</i>	<i>Designation</i>	<i>Date</i>
Mrs. M. Todd	Cleanliness Visitor	31st March, 1955
Miss P. Leake	Clerk	23rd April, 1955
Dr. P. Gabb	Medical Officer†	27th May, 1955
Miss J. M. Storey	School Nurse	30th June, 1955
Mrs. H. Gibson	Dental Officer*	28th July, 1955
Dr. M. M. Bell	Medical Officer‡	3rd October, 1955
Mrs. M. M. M. Buckland	School Nurse	14th November, 1955
Dr. P. Gabb	Medical Officer†	26th November, 1955
Miss K. M. Fenner	Speech Therapist	30th November, 1955

\* Part-time.

† Temporary.

‡ Leave of absence.

## Courses

The following proceeded on courses during the year:—

Dr. M. M. Bell: E.S.N. and M.D. children by University of London in co-operation with National Association for Mental Health.

Mr. G. F. Reed: British Psychological Society Course at Durham.

Mr. J. C. Carr

Dr. M. M. Bell

Dr. I. M. McCullough

Dr. S. Klinger

Course in Dental Anaesthesia at  
Eastman Dental Clinic, London.

## II. CO-ORDINATION

The scheme providing for the interavailability of clinic services between various sections of the Corporation's Health Services continued throughout the year. A summary of the work carried out under this scheme is given in the following two tables and references to the interavailability scheme appear in various tables in the report.

Very satisfactory co-operation exists with the hospitals. Reports and information are exchanged when necessary. All recommendations for admission to hospital made by consultants at school clinics are notified to the respective Admission Officers who deal with them without requiring the children to be seen unnecessarily at the hospital out-patient clinics.

### Services provided by the School Health Service

SERVICE	Children under 5 years		Nursing and Expectant Mothers		Ineducable Children		Children's Homes		Totals	
	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.
Minor Ailments Inspections	374	560	—	—	2	2	—	—	376	562
Minor Ailments Treatment	618	2426	—	—	5	8	—	—	623	2434
Dental Treatment	318	485	356	1104	3	6	24	94	701	1689
Orthopaedic Clinic Inspections	7	15	—	—	—	—	—	—	7	15
Orthopaedic Clinic Treatments	4	13	—	—	—	—	—	—	4	13
Ophthalmic Clinic	136	308	—	—	1	3	—	—	137	311
Aural Clinic	24	50	—	—	—	—	—	—	24	50
Rheumatism and Heart Clinic	—	—	—	—	—	—	—	—	—	—
Chiropody Clinics	2	3	—	—	—	—	—	—	2	3
Speech Therapy Clinic Treatments	—	—	—	—	1	38	—	—	1	38
Speech Therapy Inspections	—	—	—	—	—	2	—	—	—	2
Cerebral Palsy Clinic	3	18	—	—	—	1	—	—	3	19
Cerebral Palsy Treatment	2	249	—	—	—	18	—	—	2	267
Child Guidance Clinic	—	—	—	—	—	—	—	—	—	—

### Services provided for the School Health Service

Service	Cases	Attendances
Artificial Light Treatment :—		
(a) At West Hull Clinic (M. & C.W.)	116	1502
(b) At East Hull Combined Clinic	142	1643
(c) At North Hull Combined Clinic	85	1365
(d) At Sykes Street Clinic (M. & C. W.)	102	1290
Orthopaedic Clinic (East Hull)	17	825
X-Ray Examinations	184	192

## III.—MEDICAL INSPECTION

Figures relating to inspection at maintained schools are to be found in Statistical Tables I and II at the end of this report.

In addition, 104 individual inspections were carried out at Hymers College (direct grant secondary school) and 29 at the Local Health Authority's Occupation Centre.

Approximately 3,400 fewer inspections were conducted in schools in 1955 than in 1954; but we are now up to date in this respect. The swollen total in 1954 was due to a shortage of medical staff in 1952-3 with consequent arrears of work.

#### IV.—FINDINGS AT MEDICAL INSPECTIONS

Statistics relating to various defects are printed in Statistical Tables 1c, 11A and 11B at the end of this report. Most of the "Special Inspections" refer to children attending clinics.

##### Uncleanliness

The Authority's scheme for the examination and cleansing of infested pupils embodies the requirements of Section 54 of the Education Act 1944. Statistics are printed in Table III at the end of this report.

The number of individual children found in an unclean condition in 1955 was 6,137 as compared with 4,565 in 1954 and 3,484 in 1953; the percentage was 11·5 in 1955, compared with 8·7 in 1954 and 6·7 in 1953.

Cleanliness inspections in schools—Total 189,848

Findings		Individual Children		Percentage of School Roll
Nits present, but no vermin seen	....	5798	....	10·8
Vermin present	....	188	....	0·4
Dirty but no nits or vermin	....	151	....	0·3
		<hr/>		<hr/>
Total	....	6137		11·5
		<hr/>		<hr/>

During this year, as was the case in 1953 and 1954, it has not been found necessary to take any parent to Court in order to enforce cleanliness. In every case the school nurse has succeeded ultimately in securing cleanliness by persuasive means. It must not be forgotten that this involves a great deal of trouble and tact on the part of a nurse and considerable praise is due to our staff for having succeeded in this way.



### Tuberculosis

The findings of the Chest Physician in cases referred by the School Health Service are shown below.

Number of referred children who attended the Chest Clinics	...	6
Cases of definite Pulmonary Tuberculosis	.... ....	1
Cases of definite Non Pulmonary Tuberculosis	.... ....	—
Suspected cases to be kept under observation	.... ....	—
Cases not suffering from Tuberculosis	.... ...	5

### Visual Defects

In addition to the medical officers' inspections, the school nurses made 69 visits to schools during the year to carry out vision surveys of pupils aged 7 years. 5,727 pupils were inspected, of whom 430 were referred direct to the ophthalmic consultant. 331 of these pupils were inspected by the consultant and glasses were prescribed in 205 cases.

### Foot Defects

The chiropodists paid 30 visits to schools and inspected 5,079 pupils, of whom 600 were referred for treatment by the chiropodists at the clinics and 18 were referred for further medical opinion.

## V.—HOME VISITS

The number of visits paid to homes in connection with preparation for medical inspection, follow-up of children with defects, the cleanliness scheme, problem cases, etc., was 22,242.

## VI.—ARRANGEMENTS FOR TREATMENT

Summaries of the inspection and treatment work done in the school clinics are printed in the tables on pages 186 and 187.

In addition treatment continued to be carried out at the following day special schools :

Park Avenue (P.H.) School : minor ailments, three sessions ; physiotherapy, ten sessions ; speech therapy, four sessions per week.

Northumberland Avenue (E.S.N.) School : minor ailments, three sessions per week.

Cottingham Road (Open Air) School: minor ailments, ten sessions; physiotherapy, two sessions per week.

Ringworm: An arrangement exists with Hull Royal Infirmary for prompt examination and treatment in all cases.

## Places and Times of School Clinics

Inspection Clinics—	74 Beverley Road	Monday, Wednesday and Thursday, 1.15 p.m. to 5 p.m.
	114 Coltman Street	Monday, Wednesday and Thursday, 1.15 p.m. to 5 p.m.
	Morrill Street	Tuesday and Friday, 1.15 p.m. to 5 p.m.
	Ellerburn Avenue	Tuesday and Friday, 1.15 p.m. to 5 p.m.
	Anthorpe Grove School Hopewell Road School	Alternate Wednesdays, 1.15 p.m. to 4 p.m. Alternate Wednesday 1.15 p.m. to 4 p.m.
Mental Ailments Treatment Clinics—	74 Beverley Road	Monday to Friday, 9 a.m. to 12 noon and 1.45 p.m. to 5 p.m. Saturday, 9 a.m. to 12 noon
	114 Coltman Street	Do. do. do.
	Morrill Street	Do. do. do.
	Ellerburn Avenue	Monday to Friday, 1.45 p.m. to 5 p.m. Saturday, 9 a.m. to 12 noon
	Anthorpe Grove School Hopewell Road School	Monday to Friday, 1.45 p.m. to 4 p.m. Do. do.
Dental Clinics—	74 Beverley Road	} Monday to Saturday at various centres, as arranged
	114 Coltman Street	
	Morrill Street	
	Ellerburn Avenue	
Ophthalmic Clinics— Refraction work and prescription of Spectacles—	74 Beverley Road	} Monday, Tuesday, Thursday (2 p.m. to 5 p.m.), Friday and Saturday at various centres, as arranged
	114 Coltman Street	
	Morrill Street	
	Ellerburn Avenue	
Aural Clinics—	74 Beverley Road	As arranged
	114 Coltman Street	Tuesday, 2 p.m. to 4 p.m., as arranged
	Morrill Street	Tuesday, 10 a.m. to 12 noon, as arranged
	Ellerburn Avenue	Tuesday, 10 a.m. to 12 noon, as arranged
Orthopaedic Clinics—	74 Beverley Road	Monday, Tuesday, Wednesday, Thursday and Saturday, 9 a.m. to 12 noon. Tues- day and Thursday, 2 p.m. to 5 p.m. Inspections by Orthopaedic Surgeons, as arranged
	Ellerburn Avenue	Monday and Wednesday, 2 p.m. to 5 p.m. Inspections by Orthopaedic Surgeons, as arranged
		Inspections by Paediatrician, as arranged
Cerebral Palsy Clinic—	Park Avenue Special School	
Rheumatism and Heart Clinics—	74 Beverley Road and Morrill Street	} Thursday, 2 p.m. to 5 p.m., as arranged
	74 Beverley Road and Morrill Street	
Paediatric Clinics—		Monday, 9.45 a.m. to 10.45 a.m. as arranged
		Friday, 2 p.m. to 4 p.m., as arranged
		Monday to Friday 2 p.m. to 5 p.m.
Child Guidance Clinic—	Kingston College, 48a Beverley Road	Thursday 9.0 a.m. to 12.30 p.m.
Speech Therapy Clinics—	74 Beverley Road	} Monday, Tuesday, Wednesday, Friday and Saturday, 9 a.m. to 12 noon. Monday, Tuesday and Thursday, 1.30 p.m. to 4.30 p.m. Monday to Friday, 1.30 p.m. to 4.30 p.m.
Chiropody Clinics—	Kingston College, 48a Beverley Road	} Wednesday and Thursday 9 a.m. to 12 noon Thursday, 9 a.m. to 12 noon Monday, 9 a.m. to 12 noon Tuesday, 9 a.m. to 12 noon
	74 Beverley Road	
	Morrill Street	
	114 Coltman Street Ellerburn Avenue	



## School Clinics, 1952-1955

## Number of Cases

Work Undertaken	1952	1953	1954	1955
Minor Ailments—Inspection Clinics				
1. Minor Ailments treated	14491	14910	15534	14762
2. Defects inspected	11360	10891	10213	10372
3. Employment Cases	969	976	930	964
4. Miscellaneous Inspections	355	414	480	423
Refraction Clinics (new cases)	3166	4029	4298	1921
Dental Clinics—Treatment only	6832	6247	6198	7230
Orthopaedic Clinics (new cases)	124	103	87	29
Aural Clinic Inspections (new cases)	1165	1009	1195	1322
Rheumatism and Heart Clinics (new cases)	116	69	100	71
Pædiatric Clinics (new cases)	179	162	211	235
Formal Examinations for Educational Subnormality	186	138	153	159
Child Guidance (new cases)	72	42	100	103
Speech Therapy:				
1. Cases inspected (new cases)	187	111	125	116
2. Cases treated (new cases)	55	61	59	53
Chiropraxy (new cases)	1024	1346	1734	1956
Cerebral Palsy (new cases)	11	23	9	17

Notes on various clinic activities are given below:

## (a) Minor Ailments

There was a slight decrease in the total number of cases treated during the year compared with 1954. The number of cases of ringworm of the scalp was 7; this showed an increase of 4 compared with 1954. The number of cases of ringworm of the body decreased from 55 in 1954 to 52 in 1955. 85 cases of scabies, which is 30 more than in the previous year, were treated during the year. The number of cases of impetigo increased from 1,061 in 1954 to 1,066 in 1955.

## (b) Visual Defects

A summary of the work done at the Ophthalmic Clinics is given in the table below.

## Ophthalmic Clinics

	New Cases	Attendances	Glasses Prescribed
Maintained School Pupils	1778	4117	2517
Hymers College Pupils	6	16	11
Children under 5 years	136	308	88
Occupation Centre children	1	3	1
Totals	1921	4114	2617

The table below refers to pupils examined at the ophthalmic clinic for the first time during 1955.

### Summary of Conditions Found

Condition	Number of Examples
Small refractive error—glasses not advised	285
Small refractive error—glasses advised	177
Moderately severe refractive error (excluding Myopia)	228
Severe refractive errors (excluding Myopia)	5
Myopia, over 1D	157
Myopia (severe)	5
Squint	141
Conjunctivitis	71
Blepharitis	18
Keratitis and Ulcer	2
Nystagmus	2
Optic Atrophy	3
Uveitis	3
Cysts, Styes, etc.	5
Injuries and Foreign Bodies	8
Hysterical Conditions	3
Miscellaneous or Unclassified	5
Epicanthus	29
No Defect Found	82
<b>Total</b>	<b>1229</b>

The Ophthalmic Surgeon carried out operations on 74 school children at hospitals during the year. Most of these were for the correction of squint. Artificial eyes were prescribed in ten cases. The arrangements of the Hospital Eye Service for the dispensing, replacement and repair of glasses were continued throughout the year. The dispensing opticians of the No. 4 Hull (A) Group Hospital Management Committee continued to attend at the school clinics when the Consultant Ophthalmic Surgeon was present in order to take measurements and fit glasses for children whose parents had chosen to have the glasses supplied through the Hospital Eye Service.

85 school children and 16 preschool children were referred to the Orthoptic Clinic held by No. 4 Hull (A) Group Hospital Management Committee (at the Central School Clinic until 30th November, 1955 but since transferred to the premises of the Victoria Children's Hospital).

**(c) Ear, Nose and Throat Defects**

A summary of the defects found in school children investigated at the Aural Clinics is given in the table below.

**Aural Clinics**

Disease	New Cases	Attendances	Operation Required
Otitis Media	18	29	1
Congenital Deafness	3	61	—
Other Ear Defects	159	365	11
Chronic Tonsillitis and Adenoids	706	745	754
Chronic Tonsillitis only	19	20	10
Adenoids only	10	12	9
Other Nose and Throat Defects	383	567	46
Total	1,298	1,799*	831

\*Includes 58 pupils seen by the Otologist at the Sutton (Deaf) School.

Operations were carried out at various hospitals, the hospital admissions officers concerned having been informed direct by the School Health Service of the Surgeon's recommendations.

During the year individual hearing aids were provided through the National Health Service for 10 pupils attending the School for the Deaf and 9 partially deaf pupils attending ordinary schools.

**(d) Orthopædic and Postural Defects**

Summaries of the work carried out at the Orthopædic Clinics are given in the tables below. The one whole-time physiotherapist normally available at the Central and North Hull School Clinics was absent on account of sickness until June, 1955 and the work was carried out as far as practicable by a physiotherapist employed at the School for Physically Handicapped.

**Central and North Hull Orthopædic Clinics****(A) Inspections and Re-inspections by Orthopædic Surgeons**

Type of Case	School Cases		M. & C.W. Cases		Ineducable Children	
	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.
Spinal Curvature	—	10	—	—	—	—
Polio-myelitis	1	10	—	—	—	—
Cerebral Palsy	—	—	—	—	—	—
(a) Spastic	1	8	—	—	—	—
(b) Athetoid	—	—	—	—	—	—
(c) Ataxic	—	—	—	—	—	—
Osteocondritis	1	1	—	—	—	—
Fractures and Injuries	—	2	—	—	—	—
Rickets	—	—	—	—	—	—
Tuberculosis (bones)	—	1	—	—	—	—
Birth paralysis	—	—	1	1	—	—
Flat Feet	1	2	1	1	—	—
Valgus ankles	1	1	—	1	—	—
Other forms	17	40	5	12	—	—
	22	75	7	15	—	—

Total new cases—29. Total attendances for inspection—90.



*(B) Treatment*

Form of Treatment	Attendances
Massage .....	153
Electrical .....	8
Remedial Exercises .....	941
Other .....	14
Total .....	1116

A part-time physiotherapist appointed by the Health Committee is employed at the East Hull Orthopædic Clinic, which is situated in the Maternity and Child Welfare Section of the clinic premises.

**East Hull Orthopædic Clinic***(A) Inspections and Re-inspections by Orthopædic Surgeons*

Type of Case	New Cases	Attendances
Spinal Curvature .....	1	3
Poliomyelitis .....	—	4
Cerebral Palsy .....		
(a) Spastic .....	1	1
(b) Athetoid .....	—	—
(c) Ataxic .....	—	—
Osteocondritis .....	1	2
Fractures and Injuries .....	2	4
Rickets .....	—	—
Tuberculosis (bone) .....		
(a) Spine .....	—	—
(b) Other Bones and Joints .....	—	—
Birth paralysis .....	3	3
Flat Feet .....	2	2
Valgus ankles .....	1	2
Other forms .....	6	12
Totals .....	17	33

*(B) Treatment*

Form of Treatment	Attendances
Massage .....	—
Remedial Exercises .....	825
Other .....	—
Total .....	825

Orthopædic appliances prescribed by the surgeons at the clinics were supplied by the Regional Hospital Board.

*(c) Heart Disease and Rheumatism*

This clinic continued its work in conjunction with the Cardiac Unit established by the Regional Hospital Board at the Kingston General Hospital. Details of the work at the clinic are given below. The work at the clinic represents that of a provisional sorting centre, so that the attendances there are few. The supervision of cases found to have organic heart disease is carried out at the hospital at the wish of the Cardiologist.

Condition	School Cases		Children under 5 years		Ineducable Children		Totals	
	Cases	Attend.	Cases	Attend.	Cases	Attend.	Cases	Attend.
1. Rheumatic Pains or Arthritis								
(a) with heart affection	4	4	—	—	—	—	4	4
(b) without heart affection	8	14	—	—	—	—	8	14
2. Rheumatic Chorea								
(a) with heart affection	—	—	—	—	—	—	—	—
(b) without heart affection	1	1	—	—	—	—	1	1
3. Rheumatic Carditis without (1. or (2) above	—	—	—	—	—	—	—	—
4. Congenital Heart Disease	10	14	—	—	—	—	10	14
5. Functional Heart Disorder	23	29	—	—	—	—	23	29
6. No Rheumatism or Heart Disease or Disorder	25	25	—	—	—	—	25	25
Totals	71	87	—	—	—	—	71	87

### (f) Treatment by Artificial Light

This treatment is given at Maternity and Child Welfare Clinics ; 445 pupils were treated during the year.

### (g) Pædiatric Clinic

The number of new cases seen during the year was 235 and the total attendances were 454.

The table printed below shows the diseases or defects apparent in the cases attending.

Defects	New cases	Total Attendances
Nutritional Disorders	2	5
Skin	7	10
Eyes—(a) Vision	—	1
(b) Squint	—	—
(c) Other	—	—
Nose or Throat	7	16
Speech	—	1
Cervical Glands	3	3
Heart and Circulation	4	8
Lungs—		
(a) Asthma	15	36
Asthma and Rheumatism	—	1
Asthma and Other Allergic Conditions	2	8
(b) Bronchitis	25	59
(c) I.B.	5	22
(d) Other	2	5
Renal	4	7
Tuberculosis, non-pulmonary	—	1
Abdomen	11	15
Rheumatism	4	8
Developmental—		
(a) Hernia	1	1
(b) Other	19	39
Orthopaedic—		
(a) Posture	—	—
(b) Other	1	1
Nervous System—		
(a) Epilepsy	10	35
(b) Other	19	33
Psychological		
(a) Development	1	1
(b) Stability	49	86
Other Defects and Diseases	6	13
No Organic Disease Detected	38	39
Totals	235	454

## (h) Dental Treatment

Report by Mr. J. C. Carr, Principal School Dental Officer.

The year 1955, my first full year in Kingston upon Hull, has been one of settling in and planning with high hopes of future progress. There have been no dramatic developments; but rather has it been a year of gradual improvement along existing lines, a co-ordination of our separate efforts. There is still a serious shortage of Dental Officers and I cannot visualise any great or sudden increase in our numbers within the near future. The problem is a national one and is being considered as such. It may well be that the solution of our difficulties lies elsewhere. The time would seem to be opportune for a great development of the priority dental services. There is an awareness of the need and a willingness, as never before, to provide the facilities for such services. It remains to be seen what efforts will be made by all concerned with dentistry, in what ever capacity, to provide the manpower which is so urgently needed.

Here in Kingston upon Hull we have continued the policy of providing the best of which each individual is capable, and we plan to provide more and better facilities with that end in view. It is only by planning along these lines that we can hope to attract Dental Officers from the dwindling pool available and from the ranks of those recently qualified. It would be so easy, with a small staff, for the service to deteriorate into a breakdown service, with the consequent frustration and departure of existing members.

This being our policy, we have continued with the development of our orthodontic service, whilst keeping it within reasonable bounds. There is an increasing public awareness of the possibilities of orthodontic treatment, as one would expect, and requests for our services are numerous. Acting in a consultative capacity to the other members of the staff I have been conducting an orthodontic clinic to which children are steadily being referred from other clinics, school inspections and various sources. There were, at the end of the year, 87 children under treatment, 109 orthodontic appliances were fitted during the year and 6 cases were completed.

It will be noted that there has been a considerable increase in the number of general anaesthetics administered. This has been due to the establishing of regular anaesthetic sessions in each clinic and to the fulfilment of the plan, which I mentioned in my report last year, of carrying out more routine dental inspections. It will be recalled that last year four new anaesthetic machines were provided. These have been of great assistance to the anaesthetists who have expressed personal satisfaction with the machines' performances. This year, three Medical Officers who act as dental anaesthetists attended, together with myself, a week's refresher course in dental anaesthetics at the Eastman Dental Hospital in London. This proved to be of

inestimable value in the development of our team work and provided a better understanding of those aspects of general anaesthesia which are peculiar to the field of dental surgery.

With regard to the staffing situation, this has been slightly better than last year, but at the year end we find ourselves numerically weaker. Mrs. Gibson, one of the part-time Dental Officers, relinquished her appointment at the end of July on her departure to the South of England. Two other part-time Dental Officers, Messrs. D. L. Cowley and J. E. V. Shaw, have reduced the number of their weekly sessions from two to one each. These changes have resulted in a total loss of six sessions a week. We are extremely sorry that this has been necessary; but we must express our appreciation of the services which have been rendered by our part-time Dental Officers. The assistance which they have given to the members of the permanent staff in the fulfilment of their task has been invaluable.

Dentures for school children fitted by the School Dental Officers have numbered 76 and 209 radiographs have been taken.

Visits have been made each term to the Aldwark Manor Boarding Special School for the purpose of carrying out dental inspections and making arrangements for treatment.

All in all, it has been a satisfying year and if a ray of sunshine were needed to dispel the gloom which threatened to descend at the announcement of the serious shortage of recruits to the profession, perhaps it was to be found recently in my meeting in one of the clinics with two senior secondary grammar school boys, both of whom expressed their desire to adopt dentistry as a career.

The following tables and Statistical Table V at the end of this report summarise the work carried out at the dental clinics:—

### Dental Treatment

		1954		1955	
		School-children	All Cases	School-children	All Cases
New Cases	...	5396	6198	6529	7230
Attendances	...	12245	14167	13569	15258
Fillings	...	2443	2704	2593	2763
Extractions	...	11334	13853	13012	15060
Other Operations	...	3126	3524	3643	4205
(including Radiography)					

### Dental Treatment of Non-School Cases

	Children under 5 years	Expectant and Nursing Mothers	Children's Homes Cases	Ineducable Children.
New Cases	318	356	24	3
Attendances	485	1104	94	6
Extractions—				
(1) Temporary Teeth	575	—	17	—
(2) Permanent Teeth	—	1447	4	5
Fillings—				
(1) Temporary Teeth	7	—	—	—
(2) Permanent Teeth	—	141	22	—
Other Operations	10	512	40	—
(including Radiography)				
Administration of General Anæsthetics	154	135	6	2

### (j) Child Guidance

Report by Dr. J. Mackay, Consultant Psychiatrist.

#### Staff

The staff was augmented by the appointments of Mr. A. C. Smith, M.A. (Hons. Psychology), Cantab., as second psychologist and Mrs. J. Stringer, R.M.N., as social worker. The former commenced duties on 1st September and the latter on 15th August.

Mr. Reed and Mrs. Aitken completed another year of conscientious and valuable work.

#### Waiting List

By the end of the year large inroads had been made into the once formidable waiting list. Only a score of names remained on it at 31st December. One recalled the carefully pruned list of 120 which faced the single-handed psychiatrist in 1948 and realised how far along the road of achievement the clinic had progressed since then.

#### Clinical

103 new cases were seen. This number would have undoubtedly been exceeded and the waiting list virtually wiped out, but for the fact that the social workers had to share one room owing to the lack of other suitable accommodation. It is to be hoped that this undesirable circumstance will be eliminated early in the New Year.

The work of the clinic continued to be developed along the lines of previous years. Close attention was paid to physical factors and acknowledgment must be made to the Ear, Nose and Throat Consultants who operated on children referred to them on account of enlarged and infected tonsils.

Mr. Smith concentrated largely on remedial teaching thus allowing Mr. Reed greater freedom in his study of new cases and in the development of techniques such as drawing, painting and various forms of play therapy.

Increasing attention was given to interviews with parents. Fuller clinic accommodation would allow this vital service to develop more adequately.

The clinic team's experience of problems presented during this past year emphasised the importance of the child's behaviour in a free, calm and friendly setting. This led to a much more accurate assessment of the case than was possible in the formal rigid setting of the standardised intelligence tests, where movement was of necessity restricted and where results only reflected how the child was functioning along certain directions.

### **Accommodation**

The Clinical Rooms which had become very drab and dingy were redecorated with pleasing effect on children, parents and staff alike. I was glad to learn from Dr. Cann that they will be maintained in good decorative order as this is so important in the treatment of emotionally disturbed or deprived children.

### **Observers**

As in the past Student Health Visitors and other students attended from time to time.

To my colleagues who have so loyally and enthusiastically shared the responsibilities of examination and treatment my grateful thanks are due. To Dr. Cann and his staff, headmasters and headmistresses, probation officers and many others I have to acknowledge my indebtedness for a variety of assistance.

With the expansion of the clinic activities went an increased responsibility for Miss Scott, the Clerk Receptionist, whose cheerful understanding and efficiency were often commented upon by both parents and staff. Her post is a most important one. (See Report of Committee on Maladjusted Children, para. 183).

Again I have to express my sincere thanks to Mr. Francis, the Speech Therapist, for another year of close and interesting co-operation.



The following table summarises the work done at the Child Guidance Clinic:—

Classification	1st Attendances (New Cases)	Later Attendances (All Cases)	Total Attendances
Maladjustment	56	1552	1608
Maladjustment and Enuresis	3	44	47
Maladjustment and Educational Subnormality	10	143	153
Maladjustment and Stammer	4	40	44
Maladjustment (possibly post traumatic)	—	16	16
Maladjustment and Reading difficulty	—	31	31
Maladjustment and Delinquency	—	1	1
Maladjustment and ? Hysteria	—	24	24
Maladjustment and chronic infantile eczema	1	8	9
Hysteria	1	35	36
Anxiety Neurosis	5	102	107
Enuresis	8	143	151
Enuresis and Speech Defect	1	5	6
Encopresis and Enuresis	1	36	37
Encopresis and pilfering	1	5	6
Epilepsy	—	27	27
Kernicterus	—	1	1
Educational Subnormality	1	16	17
Klippel—Fiel's Syndrome and Anxiety State	—	27	27
Morbid shyness	1	26	27
Psychogenic Asthma	1	—	1
Educational Retardation	6	78	84
Temper Tantrums	2	13	15
Somnambulism	1	3	4
Total	103	2376	2479

### (k) Speech Therapy

Report by Mr. T. R. Francis, L.C.S.T.

#### Staff

One of the Speech Therapists, Miss Fenner, resigned with effect from 30th November, 1955. This is a great loss and it is to be hoped that the vacancy will be filled as soon as possible.

#### Accommodation

This continued to be satisfactory. The speech clinics continued at the Central Clinic, Kingston College and Park Avenue Special School.

#### Waiting List

The waiting list was kept very small, often, it was felt, by sacrificing extra treatment to children who needed it; that is, by only allowing one treatment session weekly instead of two or more. On the whole a greater number of children benefited.

#### Examinations and Treatment

Children continue to be examined as soon as possible, the primary factor in deciding priority being the Head Teacher's opinion with regard to how handicapped, due to speech difficulty, the child was with school work.

## School Visits

Two sessions weekly have usually been devoted to school visits. This is not sufficient, as it does not enable the therapist and teacher to have good liaison over each child. Teachers express a great interest in children attending for speech therapy; it is felt that insufficient school visiting is detrimental to an efficient speech clinic.

## Special Schools

Two sessions each week by both therapists were spent at Park Avenue Special School. These were devoted to the treatment of speech problems arising out of cerebral palsy. At least two more sessions each week would be of great benefit. As yet speech therapy work at the Northumberland Avenue Special (E.S.N.) School has been neglected with the exception of a few children attending the ordinary speech clinics.

## General Remarks

The work in co-ordination with the Children's Hospital and Child Guidance Clinic continued satisfactorily.

Experience has shown that the services of another speech therapist would be of great value, especially in the treatment of speech disorders in special schools and in allowing for more co-ordination and co-operation between the speech clinics and ordinary schools. This cannot be over-emphasized as often a speech problem is a retarding factor in education and adequate and correct control of speech difficulties at school is often so essential. It is felt that teachers would appreciate more attendance at schools by speech therapists than is possible at present.

Visits have been made to the speech clinics by student health visitors, potential and active speech therapy students, doctors, nurses and others interested in speech difficulties.

Miss Fenner and myself are very appreciative of the advice and help readily available at all times from Dr. Mackay and Mr. Reed, and latterly Mr. Smith.

To Miss Jarratt at Park Avenue Special School, thanks are due for her ready co-operation; this is so essential in the treatment of cerebral palsy. Thanks are also due to Dr. Morton Stewart for his kindly help and advice. We should like to thank Dr. Cann for his co-operation and interest.

The patience of the clerical staff is much appreciated.

The following table summarises the work done at the speech clinic:

DEFECTS	INSPECTIONS		TREATMENTS	
	New Cases	Total Attendances	New Cases	Total Attendances
Stammer .....	35	162	13	784
Stammer and Dyslalia .....	3	9	4	146
Stammer and Dysphonia .....	—	2	—	—
Dyslalia .....	40	107	14	533
Rhinolalia .....	—	—	—	12
Rhinolalia Aperta .....	2	2	1	19
Retarded Speech and Stammer .....	1	4	3	58
Dysphonia .....	1	1	—	—
Partially Deaf .....	2	2	3	86
Alalia .....	—	1	—	11
Mouth Breather .....	—	1	—	—
Retarded Speech .....	21	69	9	640
Hyper-rhinophonia .....	—	1	1	32
Dysarthria .....	—	2	—	19
Language difficulty (bilingual) .....	2	2	1	8
Cleft Palate .....	6	16	3	232
Diagnosis deferred .....	1	22	1	36
No defect found .....	2	2	—	—
	116	405	53	2616

### (l) Foot Defects

The following table shows the defects treated by the chiropodists :

Defects	No. of Cases	Attendances
Injury from badly fitting shoes .....	416	499
Poor Hygiene .....	6	6
Corns..... .....	384	472
Callosities .....	150	176
Verruca Pedis .....	455	2618
Tinea Pedis .....	11	11
Other skin conditions .....	2	3
Nail abnormalities .....	167	220
Circulatory disorders .....	9	24
Hallux Valgus .....	172	212
Other toe deformities .....	62	67
Pes Planus .....	4	4
Pes Cavus .....	17	17
Pronated feet .....	—	—
Valgus feet and ankles .....	57	73
Splay foot .....	—	—
Painful feet .....	4	4
Miscellaneous ... ..	38	59
	1954	4465

In addition 2 pre-school cases were treated (1 injury from badly fitting shoes, with nail abnormality, 1 valgus feet and ankles) involving 3 attendances.

## VII. MASS RADIOGRAPHY AND B.C.G. VACCINATION SCHEME

Report by Dr. C. H. Phillips, Senior Medical Officer, Public Health Department.

At the end of 1954 there were still about 500 school children who had been unable to take part in the B.C.G. Scheme owing to an influenza epidemic or for some other reason. Early in January further nominal rolls and a programme were prepared and during January and February, 435 children were tuberculin-tested. Of the 434 cases where the reaction was ascertained 28.80% (125) were found to give a positive result. Of the 309 tuberculin negative cases, 282 were vaccinated and post vaccination testing showed a conversion rate of 98.4% as against 95.9% in the children who were done during 1954. 28 cases were tested but did not attend for reading of the test or for completion of the course of vaccination.

Mass Miniature Radiography was offered to all the children in the 13 and 14 year group. The findings following Mass Miniature Radiography were as follows:—

- |                                    |      |      |       |
|------------------------------------|------|------|-------|
| (1) Total number of Boys examined  | .... | .... | 1,894 |
| (2) Total number of Girls examined | .... | .... | 1,763 |
| (3) Total recalled for Large Films | .... | .... | 40    |

(4) Results:—

- 1 Boy, ? active primary tuberculosis, later shown to be inactive
- 2 Girls, bilateral apical tuberculous infiltration of uncertain activity
- 6 Pupils, inactive primary tuberculosis
- 1 Pupil, dextro-cardia
- 15 Pupils, other abnormalities
- 15 Pupils, no significant abnormality—no action.

Following the conclusion of the B.C.G. vaccination programme for 1954-55 an enquiry was made with the object of elucidating any differences between two groups selected at random from among the tuberculin negative and tuberculin positive children prior to vaccination.

The two groups showed comparable results as regards place of birth (born in Kingston upon Hull or otherwise), numbers of residences and schools attended since birth. It was surprising to note that over 30% had not been breast fed during infancy (Tuberculin negative 30.91%, Tuberculin positive 34.4%). An appreciable difference was found in the percentage figures for children who had dried milk during infancy (Tuberculin negative 52.73%, Tuberculin positive 38.53%) and those who had untreated milk in childhood (Tuberculin negative 21.82%, Tuberculin positive 32.11%). There was no significant difference between the two groups as regards previous illnesses.

The most obvious difference was found in the history of previous contact with tuberculosis, details of which are summarised below.

	<i>Tuberculin Negative</i>	<i>Tuberculin Positive</i>
Total in survey	110	218
Cases having tuberculous member in family	9 (8.2%)	37 (17%)
Cases in whose family one or more have died of tuberculosis	—	32 (14.6%)
Other tuberculosis contacts	—	8 (3.6%)

### **B.C.G. Vaccination of 13-year-old children, 1955**

The procedure followed was very similar to that of the previous year but on this occasion the literature and consent forms were distributed to parents through the schools, the School Nurses following up the cases from whom no replies were received.

Following the experience in 1954, it was decided in view of the high conversion rate following B.C.G. that the Post Vaccination Tuberculin Test was superfluous. In a follow-up of the 1954/55 series it had been found that conversion following B.C.G. could be related to the size of the B.C.G. scar; those with a scar of less than 4 m.m. showing a conversion rate of 39% while above 4 m.m. the conversion rate rose sharply to about 95% or more.

The schools re-opened on the 6th September after the summer holidays, the scheme being started on the 30th September and completed on the 16th December.

On the whole the scheme went more smoothly in 1955 with fewer doctors taking part and completing the tests and vaccinations in far fewer sessions than in the previous year. In addition the Heaf method of tuberculin testing was introduced which enabled tuberculin testing of a larger number of children per session and, as will be seen below, appeared to give a more satisfactory result than the Mantoux Test in which the personal error may be increased by variation of the depth of injection and quantity injected. In addition, to the advantage of speed and consistency of the Heaf Test, the children were generally less apprehensive and in the majority of cases had no objection to being 'shot' with the gun.

The results of the B.C.G. vaccination programme, 1955-56, up to the end of 1955 are shown on the next page.

Approximately 275 children missed the vaccination through absenteeism, etc., and arrangements are being made for these to receive B.C.G. vaccination if necessary early in 1956.

I would like to express my appreciation of the help given by the Education Department, School Teachers, School Nurses, Doctors and others who took part in the scheme.

### B.C.G. Vaccination of School Children, 1955/56

	No. on Roll		No. of Consents		Percentage of Consents		No. Tested		No. Positive		*Percentage		Tested but not read or course not completed	
Total	Boys 2084	Girls 2053	Boys 1611	Girls 1496	Boys 77.30	Girls 72.87	Boys 1480	Girls 1346	Boys 407	Girls 345	Boys 27.50	Girls 25.63	Boys 50	Girls 66
Pupils not resident in Kingston upon Hull	137	59	111	41	81.02	69.49	103	38	34	14	36.89	36.84	1	2
Pupils resident in Kingston upon Hull	1947	1994	1500	1455	77.04	72.97	1377	1308	373	331	27.09	25.31	49	64

\*Percentage of positives of total number read.

No. Mantoux tested	No. positive	Percentage positive	No. multiple puncture tested	No. positive	Percentage positive
1817	401	22.07	1009	351	34.79

### VIII.—INFECTIOUS DISEASES

The notifications of infectious diseases among school children are shown below.

Disease	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total 1955	Total 1954
Scarlet Fever	34	31	19	81	165	342
Diphtheria	14	4	1	—	19	9
Poliomyelitis	—	—	4	—	4	15
Erysipelas	—	—	—	—	—	—
Acute Encephalitis	—	—	—	—	—	—
Meningococcal Infection	—	—	—	—	—	—
Dysentery	8	23	10	4	45	17
Pneumonia	20	15	6	13	54	115
Whooping Cough	20	9	55	38	122	348
Measles	737	417	56	5	1215	796
Malaria	—	—	—	—	—	—
Paratyphoid B	—	—	—	1	1	1
Food Poisoning	—	2	—	—	2	—

### Diphtheria Immunisation

The table below relates to immunisation of school children only but it must not be forgotten that many children have been immunised before commencing school attendance.

	At Clinics	At Schools	Total
Immunised without test	76	648	724
Immunised after test	1	—	1
Re-inforcing Injection	165	8517	8682



### IX.—MORTALITY AMONG SCHOOL CHILDREN

The table printed below shows the causes of death among school pupils during the year.

Disease or other Cause	Male	Female	Total
Leukaemia and blood diseases .....	—	2	2
Pneumonia .....	—	2	2
Congenital Malformations .....	—	1	1
Other infective and parasitic diseases .....	—	2	2
Other malignant neoplasms .....	1	—	1
Other heart disease .....	1	—	1
Other diseases .....	1	2	3
Motor vehicle accidents .....	3	3	6
All other accidents .....	4	1	5
Total ....	10	13	23

### X.—HANDICAPPED PUPILS

#### (a) Ascertainment

There was no change in the arrangements for ascertainment of handicapped pupils.

Recommendations of examining medical officers relating to the ascertainment of educationally subnormal pupils are given below. The figures include cases examined for the first time, re-examinations of pupils not previously classified as educationally subnormal, and re-examination of pupils previously classified as educationally subnormal who had not been admitted to a special school.

The figures relating to reports to the Local Health Authority do not agree with those given on page 213 since actual reports are not always made in the same year as the recommendations, and the figures on page 213 include cases reported after attendance at a special school.

#### Report to Local Health Authority—

Incapable of receiving education at school .....	19
Inexpedient to be educated in association with other children .....	—
Requiring supervision on leaving school .....	9
Report to remain in force .....	1*
Educationally Subnormal—Special Educational Treatment in—	
(a) Day Special School .....	50
(b) Residential Special School .....	—
(c) Ordinary School .....	141
Not Educationally Subnormal .....	57
Classification deferred .....	47
	—
	324
	—

\* This case was reported to the Local Health Authority under Education Act, 1944, Section 57(3) in 1954. A recommendation was received for the case to be reviewed under Education Act, 1948, Section 8; but it was not recommended that the report be cancelled.

**(b) Special Schools**

The numbers on the registers of each of the special schools on the 14th January, 1955, were as follows:

Park Avenue (Physically Handicapped)	....	....	78
Northumberland Avenue (E.S.N.)	....	....	177
Cottingham Road (Open Air)	....	....	200
Sutton (Deaf)	....	....	57
Wold Road (Partially Sighted)	....	....	46
Aldwark Manor Boarding (E.S.N.)	....	....	53

The figures include five deaf or partially deaf, two physically handicapped, one partially sighted and 43 educationally sub-normal (Boarding Special School) pupils resident in the areas of other Local Education Authorities. Responsibility for the cost of their education has been accepted by the Authorities concerned.

Regular inspections of the special defects concerned were carried out by approved medical staff.

*Park Avenue School for Physically Handicapped Pupils*

One whole-time and one part-time physiotherapist were employed at the school throughout the year.

A summary of the inspections and treatments carried out at the school is given below.

Inspections by Orthopædic Consultant	....	....	....	76
--------------------------------------	------	------	------	----

## Treatments—

## (a) Registered pupils:—

Massage	....	....	....	....	....	—
Remedial Exercises	....	....	....	....	....	1789
Electrical	....	....	....	....	....	—
Sunlight	....	....	....	....	....	234
Minor Ailments	....	....	....	....	....	380
Plaster of Paris Splints	....	....	....	....	....	2
Speech Therapy	....	....	....	....	....	266
Miscellaneous	....	....	....	....	....	490

(b) Cerebral Palsy Out-Patient treatments	....	....	269
---	------	------	-----

Orthopædic appliances were provided and repaired under National Health Service arrangements.

During the year 23 pupils were admitted to hospitals for surgical treatment.

The consultant pædiatrician conducted clinics at the school on eleven occasions for cases of Cerebral Palsy and inspected 52 children. The cases inspected included one under statutory supervision by the L.H.A. as ineducable, one child resident in the East Riding and 18 attendances by children not yet of school age.

*Northumberland Avenue (E.S.N.) School*

The number of formal re-examinations of pupils in attendance at the school carried out during the year was 128.

During the year 48 children left the school in the following circumstances:

Transferred to Boarding Special School	....	....	....	....	1
Transferred to Cottingham Road (Open Air) Special School	....	....	....	....	1
Transferred to Approved School	....	....	....	....	1
Transferred to ordinary schools	....	....	....	....	2
Before attaining 16 years, reported to Local Health Authority as ineducable	....	....	....	....	2
On attaining 16 years, reported to Local Health Authority for supervision	....	....	....	....	29
On attaining 16 years not for supervision	....	....	....	....	8
Left the City	....	....	....	....	3
Deceased	....	....	....	....	1

*Aldwark Manor Boarding (E.S.N.) School*

This residential school, opened in September, 1954, has now completed a full year. Beginning as a collection of pupils of uncertain potentialities and troublesome behaviour (for that was the reason in most cases for residential schooling) it is now an orderly whole with a busy programme and little unoccupied time. A very marked improvement in the social behaviour of the boys has been noticed by the school medical officer from week to week. Bearing in mind that they began with a teaching and domestic staff entirely new to this sort of child and a building, owing to factors beyond our control, only partly equipped, the Head Master and Matron (Mr. and Mrs. Lamb) deserve to be congratulated on having created a living school community.

Pupils are admitted from the areas of other Local Education Authorities in addition to Kingston upon Hull. All vacancies were soon taken up.

The boys are all on the National Health list of a local practitioner who attends as required. Regular visits are paid by a School Medical Officer and a School Dental Officer from Kingston upon Hull for periodic medical and dental inspections and re-inspections and for formal re-examinations for educational sub-normality.

Arrangements exist with the York Education Authority for the provision of dental treatment and with the York Hospital Management Committee for specialist medical examination and treatment when required.

The number of formal re-examinations of pupils in attendance at the school carried out during the past year was 52.

*Cottingham Road (Open Air) School*

A full-time nurse was employed at the school and the pupils were kept under close medical supervision and treatment throughout the year. The following table shows the work carried out:

General re-inspections by Medical Officers	....	....	735
Shower baths	....	....	5,545
Cleanliness inspections	....	....	6,147
Weighing and measuring	....	....	4,487
Treatments of minor ailments	....	....	6,358
Treatments of orthopaedic defects and breathing exercises			661
Sunlight treatment	....	....	81

There is still a tendency for a few vacancies to exist at this school. This is partly to be attributed to improved housing and feeding of the child population in recent years, causing a fall in the number of debilitated children. Another factor, however, is a tendency for parents, living in or moving out to the new estates on the east side of the city, to refuse places because of the distance to the school. Organised transport is provided by the Local Education Authority only from the centre of the town to the school.

*Wold Road (Partially Sighted) School*

Towards the end of the year the lighting of one classroom was improved by the installation of "Globelight" fittings. In the limited period they were in use, the School Medical Officer and the Head Master thought them a great improvement and in due course it is intended to make the same alterations in the other classrooms.

The pupils are under the regular care of the Ophthalmologist.

*Sutton (Deaf) School*

The pupils were under the regular care of the Otologist. There is a number of cases at this school resulting from treated tuberculous meningitis, some of whom have motor palsies as well as deafness. These cases would, of course, have died from the original illness in times before the discovery of modern anti-biotic treatment.

### (c) **Young Deaf Children not attending schools**

In March, 1955 an arrangement was commenced whereby the Head Master of the Sutton (Deaf) School or his deputy now attends the school clinics by appointment to give instruction to mothers and young deaf children in cases where the latter are too young or otherwise unfit to attend his school. All cases concerned are first seen by an Otologist with special interest and experience in deaf children. Where doubt exists the Otologist and the Head Master see the child together. Children below the age of two years are also included.

So far very few children have been dealt with in this way, because nearly every case has been admitted to the school soon after being brought to notice.

## **XI. NURSERY SCHOOLS AND CLASSES**

The City has two nursery schools and 12 nursery classes (at ten schools) with accommodation for 135 in schools and 360 in the classes. Admission is not based on the medical condition of the children, but the school nurses provided information about home conditions, etc., to assist the Chief Education Officer in deciding priorities. Medical officers visited the nursery schools and classes at intervals to carry out routine medical inspections and to make general observations on the children. A school nurse visited each nursery school and class weekly.

## **XII. PHYSICAL EDUCATION**

Report by Miss M. B. Black and Mr. A. W. Eves, Inspectors of Physical Education.

Physical education in schools aims at improving physical development, assisting normal growth and raising the standard of health of school children. Regular school physical education lessons in gymnastics, dance, games and swimming form the basis of this work.

Under the present extensive school building programme generous facilities for physical education have been included in the many new schools erected in the city. All other schools which have a hall available for physical education lessons have been provided with agility, climbing and vaulting apparatus suitable to the age of the children. The supply of this apparatus has had a marked effect on the value of the work.



The Open Air School, School for the Deaf and School for Educationally Sub-Normal children have also been equipped with agility apparatus, and this has resulted in an improvement in the quality of the work amongst the children at these special schools.

Many schools with no indoor facilities visit nearby halls and central gymnasias where portable junior agility and gymnastic equipment is used.

Few schools now depend entirely on outdoor facilities where lessons can be taken only if weather conditions are suitable.

In all primary schools and secondary girls' schools dance is one of the most popular forms of exercise; many varieties of dance are taught and these include movement training, mime, national and country dance.

In order to ensure that all children of the appropriate age receive a weekly organised games lesson the Education Committee's playing fields are used to capacity. Where playing fields have been taken over for new school building purposes, arrangements have been made for classes of children to be conveyed by special transport to new sites on the outskirts of the city. In addition, all the Committee's playing fields are extensively used for matches on Saturdays and after school hours.

Swimming plays an important part in the physical education programme. Arrangements are made to hire every available swimming pool in the city for the instruction of school children during school hours. Eight swimming instructresses are employed to assist the teachers with the instruction. Under these arrangements it is possible for the majority of children of secondary school age and for the children aged 10-11 years in the primary schools to have a weekly visit to the baths. The present scheme provides every normal child with an opportunity to learn to swim at some time during his or her school career.

Much valuable work is carried out on a voluntary basis after school hours by the various school club and sports associations. These organisations provide opportunities for specialised training and league competitions. All school playing fields, apparatus and indoor training facilities are made available for use by these associations, and special facilities are provided for winter swimming at the Albert Avenue Baths and for winter cricket coaching at the indoor cricket school at Madeley Street bath hall.



## XIII.—PROVISION OF MEALS

The School Health Service is not directly concerned with the provision of meals but the statistics printed below may be of general interest.

Total dinners supplied—2,216,000

Month	Largest number of dinners in one week	Largest number of pupils fed in one week
January .....	50163	13165
February .....	52838	13942
March .....	52604	13971
April .....	52722	13940
May .....	52821	14405
June .....	52123	14171
July .....	51540	14049
August .....	Holidays	Holidays
September .....	54438	14503
October .....	56281	14871
November .....	57543	15288
December .....	60307	16201

## XIV.—MISCELLANEOUS

In addition to the work referred to elsewhere in this report, other duties have been carried out as shown below.

## Medical examinations—

Children, employed out of school hours .....	964
Children, in connection with theatrical employment .....	51
Children, referred from the Juvenile Court .....	32
Teachers, mostly in connection with absence from duty .....	5
Employees, in connection with appointment to Local Government Service .....	42
Students, prior to admission to Training Colleges .....	120
Teachers, on appointment .....	47
Tests of first-aid knowledge of adult students of the Nautical College .....	126

# MINISTRY OF EDUCATION STATISTICAL TABLES

## for the year ended 31st December, 1955

## FORM 8M

TABLE I

### MEDICAL INSPECTIONS OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

## A.—PERIODIC MEDICAL INSPECTIONS

Age Groups inspected and Number of Children examined in each—

V plus	5979
X plus	5254
XIV plus	3752
Total	14985
Additional Periodic Inspections	702
Grand Total	15687

## B.—OTHER INSPECTIONS

Number of Special Inspections	10226
Number of Re-inspections	16342
	26568

## C.—PUPILS FOUND TO REQUIRE TREATMENT

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING DENTAL DISEASES AND INFESTATION WITH VERMIN)

Group (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Table IIa (3)	Total Individual Pupils (4)
V plus	6	1192	1197
X plus	241	598	798
XIV plus	227	220	431
Total (prescribed Groups)	474	2010	2426
Additional Periodic Inspections	26	72	95
Grand Total	500	2082	2521

TABLE II

## A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR 1955

Defect or Disease (1)	Periodic Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
Skin....	245	44	2369	2
Eyes : (a) Vision ....	500	21	289	8
(b) Squint ....	119	27	31	1
(c) Other ....	89	14	652	4
Ears : (a) Hearing ....	55	24	59	1
(b) Otitis Media ....	32	38	38	1
(c) Other ....	25	11	292	2
Nose or Throat ....	1054	1412	128	4
Speech ....	62	101	13	—
Cervical Glands ....	243	1046	5	—
Heart and Circulation ....	57	87	7	—
Lungs ....	111	250	30	6
Developmental : (a) Hernia ....	21	15	—	—
(b) Other ....	35	51	3	—
Orthopædic : (a) Posture ....	25	95	4	—
(b) Flat Foot ....	64	61	22	3
(c) Other ....	108	140	51	6
Nervous System : (a) Epilepsy ....	7	6	3	—
(b) Other ....	8	17	13	2
Psychological : (a) Development ....	5	19	7	—
(b) Stability ....	13	24	14	1
Other ....	139	64	5878	53

## B.—CLASSIFICATIONS OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS

Age Groups (1)	Number of Pupils Inspected (2)	A. (Good)		B. (Fair)		C. (Poor)	
		No. (3)	Percentage of Total (col. 2) (4)	No. (5)	Percentage of Total (col. 2) (6)	No. (7)	Percentage of Total (col. 2) (8)
V plus .....	5979	2617	43.8	3309	55.3	53	0.9
X plus .....	5254	2466	46.9	2742	52.2	46	0.9
XIV plus .....	3752	2118	56.4	1624	43.3	10	0.3
Additional Periodic Inspections ....	702	365	52.0	333	47.4	4	0.6
Total .....	15687	7566	48.2	8008	51.1	113	0.7

TABLE III  
INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurses or other authorised persons	189848
(ii) Total number of <i>individual</i> pupils found to be <i>infested</i> .....	5986
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944) .....	478
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) .....	1

TABLE IV

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING SPECIAL SCHOOLS)

## GROUP 1. DISEASES OF THE SKIN (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE III)

	Number of Cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm:		
(i) Scalp	7	7
(ii) Body	52	—
Scabies	85	—
Impetigo	1066	1
Other skin diseases	2004	5
Total	3214	13

## GROUP 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	929	140
Errors of Refraction (including squint)	—	1644
Total	929	1784
Number of Pupils for whom spectacles were :—		
(a) Prescribed	—	2517
(b) Obtained	—	2353

## GROUP 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment—		
(a) for diseases of the ear	—	51
(b) for adenoids and chronic tonsillitis	—	3841
(c) for other nose and throat conditions	—	296
Received other forms of treatment	738	158
Total	738	4316

## GROUP 4.—ORTHOPAEDIC AND POSTURAL DEFECTS

	By the Authority	Otherwise
Number treated as in-patients in hospitals	—	28
Number treated otherwise, e.g., in clinics or out-patient departments	151	—

## GROUP 5.—CHILD GUIDANCE TREATMENT

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
	181	1
Number of pupils treated at Child Guidance Clinics		

## GROUP 6.—SPEECH THERAPY

	Number of cases treated	
	By the Authority	Otherwise
	130	—
Number of pupils treated by Speech Therapists		

## GROUP 7.—OTHER TREATMENT GIVEN

	Number of cases treated	
	By the Authority	Otherwise
	11432	—
(a) Miscellaneous minor ailments	445	—
(b) Other—	1954	—
(1) Artificial Sunlight	—	258
(2) Chiropody	—	6
(3) Orthoptic	—	221
(4) Surgical Conditions, excluding Tuberculosis	—	37
(5) Rheumatism and Heart	—	—
(6) Chest diseases, excluding T.B.	—	15
(7) T.B. other	—	21
(8) Nervous System	—	—
(9) Miscellaneous	—	—
Total	13831	558

TABLE V

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers—										9623
(a) At Periodic Inspections										5253
(b) As Specials										14876
Total (Periodic and Specials)										11074
(2) Number found to require treatment										10540
(3) Number offered treatment										6529
(4) Number actually treated										13569
(5) Attendances made by pupils for treatment										
(6) Half-days devoted to Periodic Inspections*	55	} Total								1499
Treatment	1444									
(7) Fillings	2506	} Total								2593
Permanent Teeth	87									
Temporary Teeth	2135	} Total								2205
(8) Number of teeth filled	70									
Permanent Teeth	2943	} Total								13012
(9) Extractions	10069									
Permanent Teeth	3609	} Total								2147
Temporary Teeth	34									3643
(10) Administration of general anaesthetics for extractions										
(11) Other Operations—										
Permanent Teeth										
Temporary Teeth										

\*The total number of sessions devoted to treatment of all types of cases was 1624. Separate sessions were not devoted to the treatment of non-school cases. The time devoted to the treatment of cases other than school pupils is estimated at 180 sessions, leaving 1444 sessions devoted to the treatment of school pupils.

## FORM 21 M.

## HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS (OTHER THAN HOSPITAL SCHOOLS) OR BOARDING IN BOARDING HOMES

	(1) Blind (2) Partially Sighted		(3) Deaf (4) Partially Deaf		(5) Delicate (6) Physical- ly Handi- capped		(7) Educa- tionally sub- normal (8) Malad- justed		(9) Epi- leptic	Total 1-9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
During the Calendar Year ended 31st Dec., 1955										
A. Handicapped pupils <i>newly placed</i> in Special Schools or Boarding Homes	1	7	4	—	63	9	56	1	—	141
B. Handicapped pupils, <i>newly assessed</i> as needing special education or treatment at Special Schools or in Boarding Homes	2	6	5	—	71	5	43	—	—	132
On or about 31st January, 1956										
C. Number of Handicapped pupils from the area:										
(i) on the registers of Special Schools as										
(a) Day pupils	—	43	44	9	204	71	177	—	—	548
(b) Boarding pupils	8	1	4	1	—	1	13	2	—	30
(ii) on the registers of independent schools under arrangements made by the Authority	—	—	—	1	—	—	1	—	—	2
(iii) Boarded in Homes	—	—	—	—	—	—	—	—	—	—
Total (C)	8	44	48	11	204	72	191	2	—	580
D. Number of handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(i) in hospitals	—	—	—	—	—	—	—	—	—	—
(ii) in other groups	—	—	—	—	—	—	—	—	—	—
(iii) at home	—	1	—	—	1	1	—	—	—	3
E. Number of handicapped pupils from the area requiring places in Special Schools										
(i) Total—										
(a) Day	—	—	—	—	3	—	3	—	—	6
(b) Boarding	1	—	—	—	—	—	1	—	—	2
No. of pupils included in the totals above—										
(ii) who had not reached the age of 5										
(a) awaiting day places	—	—	—	—	—	—	—	—	—	—
(b) awaiting boarding places	1	—	—	—	—	—	—	—	—	1
(iii) who had reached the age of 5 but whose parents had not consented to their admission to a Special School:										
(a) awaiting day places	—	—	—	—	—	—	1	—	—	1
(b) awaiting boarding places	—	—	—	—	—	—	—	—	—	—

Education Act, 1944. Number of children reported to the Local Health Authority during Calendar Year 1955, under:—

- (a) Section 57(3) (excluding any returned under (b) )  
 (b) Section 57(3) relying on Section 57(4)  
 (c) Section 57(5)

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